



CONTROL-COVID-FAVIPIRAVIR Investigational Product Destruction Form

Protocol little	Control of COVID-19 in Long Term Care Homes		
Investigational Product	Favipiravir		
Institution Name			
Site Number		Principal Investigator	Dr. Allison McGeer
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Quantity Destroyed		Date of Destruction (dd Mmm yy)	Click here to enter a date.
Lot Number			
Reason for Destruction	 Expired medication		
Name of Individual who Performed Destruction			
eSignature <i>OR</i> Signature and Date (from Individual who Performed Destruction)			
Upon destruction of medication, please email the completed form to:			
Name	Gurpreet Lakhanpal		
Role	Manager, Clinical Trials		
Institution	Applied Health Research Centre, Li Ka Shing Knowledge Institute St. Michael's Hospital		
Institution Address	30 Bond Street, Toronto, ON, M5B 1W8		
Telephone Number	416-864-6060 ext. 47835		
Fax Number			
Email Address	Gurpreet. Lakhanpal@unityhealth.ca		

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