

Instructions for Commercial Product Access for Clinical and Pre-Clinical Research

Purchasing product:

1. Complete the *Commercial Product Access for Clinical and Pre-Clinical Research Request Form*.
2. Email the form to Genentech via csclinicaltrials-d@gene.com.
3. The request may take up to ten business days to review.
4. Product orders must be placed **within 6 months of approval**. Order quantity must be within the approved limit(s). If additional quantity is required, another *Request Form* must be submitted.
5. Commercial product must be purchased from an approved wholesaler or distributor and will be shipped by Genentech. A list of approved distributors can be found on www.genentech-access.com.

Important Guidelines:

- **Licensure to Handle Genentech Product:** Researchers requesting to purchase commercial product for research purposes must provide valid and appropriate state license information.
- **Institutional Approval:** Researches who do not have a clinicaltrials.gov reference number must provide study design and Institutional Review Board protocol number.
- **Ability to Audit:** Genentech may audit facilities receiving Genentech commercial product.
- **No Ex-U.S. Shipment:** Research studies must be conducted within the United States of America.
- **Product Availability:** Product availability is not guaranteed at time of order. Please be aware that shipment of product may be delayed.
- **Product Returns:** Expired product may be returned in accordance with Genentech's Product Return Policy. Please contact Genentech Customer Service at (800) 551-2231 for the current policy.
- **Wholesaler/Distributor Change:** Researchers should contact Genentech at csclinicaltrials-d@gene.com if they plan to switch between approved distributors.

Please contact Genentech Clinical Trials Customer Service at csclinicaltrials-d@gene.com with any questions.



Commercial Product Access for Clinical and Pre-Clinical Research Request Form

Please complete ALL information below or research request will be denied.

Ship-To Facility Information (CRO or Purchasing Entity)

First Name: _____	Last Name: _____
Facility Name: _____	State License #: _____
Street Address: _____	City: _____
State: _____	Zip Code: _____
Phone: _____	Email: _____

Authorized Distributor (Note: Please contact Genentech if you plan to switch between distributors)

Distributor: _____

Study Administrator / Sponsor Contact Information

First Name: _____	Last Name: _____
Company Name: _____	Company URL: _____
Street Address: _____	City: _____
State: _____	Zip Code: _____
Phone: _____	Email: _____

Product Requested

Name / Strength: _____	NDC: _____	Quantity: _____
Name / Strength: _____	NDC: _____	Quantity: _____
Name / Strength: _____	NDC: _____	Quantity: _____

Do you anticipate multiple shipments for this order? Yes No If yes, how many? _____

Will any product be shipped outside of the United States? Yes No

Is this order for research previously approved by Genentech? Yes No If yes, approval number: _____

Study Information

Study Title: _____

Intended Start Date: _____ Intended End Date: _____ ClinicalTrials.gov Number: _____

Site Location(s): _____

Study Objective: _____

Additional Study Information (Complete this section if this research is **not** registered on ClinicalTrials.gov)

Study Type (Check all that apply)

Analytical: <input type="checkbox"/> Structural <input type="checkbox"/> Functional/PK/PD	Institutional Review Board: _____
Clinical: <input type="checkbox"/> Phase I <input type="checkbox"/> Phase II <input type="checkbox"/> Phase III <input type="checkbox"/> Phase IV	Protocol Number: _____
	Target Enrollment (Number of Participants): _____