

MARKEN PROJECT SPECIFIC DRIVER TRAINING



DTP Combined Training

NOTE: THROUGHOUT THE FOLLOWING SLIDES, ANY INDICATION TO COLLECT AN ACTUAL SIGNATURE PRE-DATES THE CURRENT 'NO-TOUCH' PROTOCOL IN PLACE FOR ALL PICKUPS/DELIVERIES.

Patients treated in this clinical trial are suffering from a rare hereditary disease. MARKEN supports the treatment of these patients by delivering study drug directly to their homes.

Drivers:

Drivers must be (Study) trained prior to performing the job. In addition, driver's **name and cell phone** must be provided upon receiving alert. This includes an Agent's driver.

Delivery Recipients:

ONLY the patient or nominated patient representative (as indicated on the booking form) will be present to receive (or collect from) and sign for the shipment. If someone else is present, get their ID information BEFORE calling the AEMarken Team.

**NO ONE ELSE CAN SIGN FOR (OR COLLECT FROM) THE
DELIVERY WITHOUT EXPRESS PERMISSION
BY CALLING THE AEMARKEN TEAM: 775-372-9019**

Driver MUST have **2 (two)** copies of the Marken HAWB

- ✓ The collection site signs* under the “Shippers signature” area (in duplicate). Complete all except “Photo ID Type”. (No Photo ID check necessary upon collection, unless tendering to an airline.)
- ✓ Driver completes “Collected in good order & condition” section (in duplicate). If requested, a copy of the Marken Airwaybill may be given to the patient, upon delivery as a receipt.
- ✓ **Recipient (delivery) ***Does Not Sign*** “Received in good order & condition” (in duplicate) upon delivery. Enter only the date (dd/mm/yy) and time in 24-hour clock.**
- ✓ ***UNDER CURRENT 'NO-TOUCH' POLICY, ALL NAMES ARE PRINTED BY THE DRIVER. NO PAPERWORK OR ANYTHING ELSE IS TO BE EXCHANGED.**


MARKEN AIRWAYBILL

Blind Study
Patient ID: 402-001-0016
Total of IMP kits included: 2
Maben, West Virginia 25870
USA
* Blind Study

Package
1 of 1

605X07361049


Special Instructions		Collected in good order & condition	Received in good order & condition
Pls preconditioned USB TT4/Credo Series4 2+8c Always call Marken upon collection & upon delivery to provide verbal temp. readings display on TT4. If any excursion/bell call ASAP. Recover/credo/TT4		Signature Driver Completes This Section	Signature BLINDED INFO - DO NOT WRITE Receiver Does NOT Sign
		Shippers signature Pickup Site Rep Completes this Section	Printed name BLINDED INFO - DO NOT WRITE
Printed Name Date	Date Photo ID Type	Date Time	Printed name BLINDED INFO - DO NOT WRITE Date Time
NOTE: The goods described above are accepted in apparent good order and condition (except where noted by shipper or noted above) for delivery to the named consignee, subject to Marken's Standard Terms and Conditions, available for review at http://www.marken.com/terms-and-conditions.aspx , which limit Marken's liability			



MARKEN
a UPS Company

AIRWAYBILL

Marken Philadelphia
215 W. Bridgewater Road, Bridgewater Business Park, Aston, PA 19014, United States




636X14513139

Shipper			Consigned			Waybill Number		
Blinded Data			Norton Healthcare Study Clinic			636X14513139		
Blinded Data			315 E. Broadway			Schd Collection		
Blinded Data			Suite 195			16 Nov 2020		
Blinded Data			Lexington, KY 40202			Schd Delivery		
Blinded Data						16 Nov 2020		
Contact Blinded Data			Contact Marti Gardner			Client Account		
Patient Id US10100-004336			Reference ENSEMBLE DFP-swab/sal. T43-US10100					
Telephone Blinded Data			Telephone 502.629.3550			US1485		


Content Description	Pcs	Range (°C)	Kgs	Package			Labels				
				Type	Supplier	Days (L/W/M/Th/F/Sa)	Type	Supplier	Rev1	Rev2	
Biological Sample - Human CAT B	1	+2 to +8	3.00	Nanocoat 2-85408 Summer	Marken	31 21 19					
TOTALS				Pieces	1	Actual Kgs	3.00	Volu Kgs	2.38	Value	0.00

Special Instructions	Collected in good order & condition	Received in good order & condition
Driver must meet Participant at agreed time !! Strictly follow NO TOUCH POLICY MARKEN to provide 2-8 degree packaging SAME DAY DELIVERY TO SITE	Signature DRIVER SIGNATURE ONLY	Signature
Shippers signature BLINDED INFO - DO NOT WRITE	Printed name DRIVER ONLY	Printed name
Printed Name BLINDED INFO - DO NOT WRITE	Date	Time
Date	Photo ID Type	

NOTE: The goods described above are accepted in apparent good order and condition (except where noted by shipper or noted above) for delivery to the stated consignee, subject to Marken's Standard Terms and Conditions, available for review at <http://www.marken.com/terms-and-conditions.aspx>, which limit Marken's liability.



MARKEN
a UPS Company



636X14513139

Marti Gardner
Norton Healthcare Study Clinic
315 E. Broadway
Suite 195
Lexington, KY 40202

Package
1 of 1

Tel: 502.629.3550

MARKEN DTP BOOKING FORM PICKUP FROM/DELIVERY TO PATIENT HOME ONLY

MF-DTP-004 Version 05
Marken Project ID :



PATIENT HOME PICK-UP/DELIVERY BOOKING FORM

Client Name: Medpace Client Account: US1093 Site: 01/Upenn Booking Templates: DTP: PVO-1A-202_UPenn DFP:	Pick-Up Date: _____ Pick-Up Time: _____ Delivery Date: _____ Delivery Time: _____	Airway Bill Numbers: DTP: <u>636X12243169</u> DFP: _____
Pickup Address: Hospital Of the University Of Pennsylvania Invst Drug Service, Maloney Building, Ground Floor 3600 Spruce St Philadelphia, PA 19104 United States Contact Name: <u>Katherine Toder</u> <small>(only for required to present photo identification)</small> Home Phone: <u>774-281-6706</u> / Mobile: _____ E-mail Address: <u>Katherine.Toder@uphs.upenn.edu</u>	<input type="checkbox"/> Depot <input type="checkbox"/> Clinic / Hospital / Site <input type="checkbox"/> Patient Home <input type="checkbox"/> Nurse	Contents: Shipping Conditions/Qty.: <input type="checkbox"/> Ambient _____ <input type="checkbox"/> Refrigerated _____ <input type="checkbox"/> Frozen _____ <input type="checkbox"/> Combo _____
Delivery Address: Timothy Hazlett --- 1673 Lancaster Drive O'Fallon, IL 62269 United States Contact Name: <u>Debbie Hazlett</u> <small>(only for required to present photo identification)</small> Home Phone: <u>618-972-7913</u> / Mobile: _____ E-mail Address: <u>debbie@expressmedicalcare.com</u>	<input type="checkbox"/> Patient/Subject Home <input type="checkbox"/> Legally Authorized Representative <input type="checkbox"/> Nurse <input type="checkbox"/> Site <input type="checkbox"/> Lab	<input type="checkbox"/> Return Required
Subject ID No. (MANDATORY!): <u>01-020</u> Viseo enables patients to track shipments in real time by following Marken provided link. Does the patient want to utilize Viseo? <input type="checkbox"/> Yes, wants to utilize Viseo Service, include patient's email address or mobile phone number <input type="checkbox"/> No, does not want to utilize Viseo Service		
Received by (DTP Only): Signature _____ Date _____		

Investigator Booking Process Instructions

- Fill in the details above.
- At least 72 business hours prior to the pick-up date, e-mail the form to: [please indicate corresponding Marken e-Mail address](#) or call [please indicate corresponding Marken phone number](#)
 - Within 1 business day, a receipt confirmation will be sent via email or phone from Marken

Temperature Readings (to be completed by the Marken Driver):

Serial Nr. Of the used Device: _____ Temperature Excursion: *YES or NO

***NOTE: Marken driver MUST remind the receiver that the drug product is not to be used if temperature excursion has occurred with the shipment until further notice from the clinical site/sponsor.**

Driver / Dispatcher Instructions: Please ensure that the completed document is returned to your dispatch office within 48h and original document destroyed as soon as the verified copy is provided to Marken! Please confirm in writing that both -verification and destruction of the original documents- have been completed!

MF-PCS-018 v01 Rapid Response Direct to Patient (DTP) / Direct From Patient (DFP) Booking Form

RAPID RESPONSE DTP/DFP BOOKING FORM

Client Name	Eli Lilly	Booking Template	RR_636_PH1082_United States and Puerto Rico_Eli Lilly
Client Account Number	PH1082	Marken Waybill Number	
Project ID/Protocol	LOXO-RET-17001		

DTP Shipment Type	<input checked="" type="checkbox"/> DTP Shipment <i>only</i> <input type="checkbox"/> DTP and return shipment to site (DFP) <input type="checkbox"/> DFP Shipment <i>only</i>
Site Number	121
Pickup Date & Time (ddmmyyyy & 24hrs clock)	20APR2020 1000
Delivery Date & Time (ddmmyyyy & 24hrs clock)	20APR2020 1400
Pickup Address: 1365 Clifton Rd NE Bldg C, Suite C3012 Atlanta, GA 30322	Delivery Address: 1020 Marina Court McDonough, GA 30252
Contact Name: Erin Davis (may be required to present photo identification) Phone: 502-608-3568 E-mail Address: erin.t.davis@emory.edu	Contact Name: Randy Smith (may be required to present photo identification) Phone: 404-368-1452 E-mail Address: jacobsmith298@gmail.com
Subject / Patient ID No: 121-004	

Shipment Content: <i>(Product and dimensions)</i>	Qty	Temperature Requirements	Temperature monitoring & Packaging Supply Responsibilities
1 bag with pill bottle, envelope of documents	1		<ul style="list-style-type: none"> • Insulated shipper box for (temperature range according to products specs.) • Temperature logger (conditioned to 15 to 25°C)
Add or Delete (N/A) as needed			

Special Instructions / Comments:
 Please call pick-up contact prior to arrival; driver will not be allowed in building and contact will need to meet them outside.


Site Confirmation of DTP shipment request
 I confirm that I am authorized to request this DTP/DFP shipment for the patient and Study documented above and the patient understands Marken's role in the Study.

Authorized by: Erin Davis (name)

Title: CRC Date (ddmmyyyy): 17APR2020

- Investigator Booking Process Instructions**
- Fill in the details above.
 - At least 72 business hours prior to the pick-up date, e-mail the form to **DTP.Booking.NORAM@marken.com** Within 1 business day, a receipt confirmation will be sent via e-mail or phone from Marken

CONFIDENTIAL

MF-PCS-018 v01 Rapid Response Direct to Patient (DTP) / Direct From Patient (DFP) Booking Form  a UPS Company

Temperature Excursion - If applicable: (To be completed by the Marken Driver)

Serial Nr. of the used Device: _____ Temperature Excursion:
*YES or NO

Note: If there is an alarm "A" shown on TT4, to keep the TT4 running and do not stop TT4, return shipment to site and stop TT4 upon return delivery to site.

Site Signature if temperature excursion occurred and shipment returned to site (if applicable)

Site receiver signature: _____ Date _____ /:

Received by (DTP only): _____ (print name)

Signature: _____ Date: _____

**** Please confirm with Marken if specific instructions apply – see below.****

Driver / Dispatcher Instructions: Please ensure that the completed document is returned to your dispatch office within 48h and original DTP documents are retained in a secure location with limited access until further notice.
Where it is not possible to exchange the hard copy due to specific local restrictions and instructions (for example, due to communicable disease outbreak) please take a picture of the Booking Form once signed by the authorized recipient (including all four corners and excluding any other objects). Leave the signed Booking Form with the patient, return the electronic copy to the Marken office, and delete the picture of the DTP document from your electronic device once Marken has confirmed receipt.

FRM-DTP-005 Version 3

Direct-To/From-Patient (DTP) Driver Instruction Checklist

Direct to Patient Home Delivery

Marken drivers and authorized subcontractors who deliver clinical trial-related shipments directly **TO OR FROM** a patient's home must adhere to the following:

- Wear a Company uniform and present photo ID when identifying yourself at the patient's home.
- Review the delivery email for any special instructions, including requirements for handling and reporting temperature monitors and alarms (if applicable)
- Behave in a professional, respectful manner at all times.
- DO NOT cross the threshold and enter the patient's home under any circumstance, even if requested by the patient.
- Request to see a government issued photo identification for the patient or the patient's legally acceptable representative (as named in the email) and confirm their identity.
 - Driver's Name / Signature _____
 - Date / time ID verified _____
- Avoid direct contact with the product that is being delivered / collected. Handover the shipping box to the patient and wait for return shipment to be packed, by the patient.
- If the patient or the patient's legally acceptable representative (as named in the email) is not available, call Marken for further instructions. **DO NOT DELIVER THE PACKAGE TO ANYONE ELSE.**
- DO NOT DISCUSS with the patient or anyone else in the patient's home anything related to the clinical trial, their medical condition, or their experience with the medication being delivered.
- If the patient tries to discuss these issues, please inform them politely that you are not allowed to discuss these topics and that if they have any questions they should contact their doctor directly.
- If the patient has questions regarding delivery or scheduling of deliveries, you should direct them to call Marken's Depot at 631-396-7545.
- All patient information must be protected from access by unauthorized persons and treated as confidential at all times.

Driver's Signature: _____ Date: _____

MF-PCS-021 v02 Rapid Response Driver Instruction Checklist

Rapid Response Direct-To-Patient (DTP) Driver Instruction Checklist

Note: If you have not completed DTP Driver Training with Marken, you may not handle this shipment

Reminders:

- ✓ State you represent Marken and are picking up/delivering a shipment
- ✓ Do not cross the threshold of a participant's home under any circumstance
- ✓ Avoid direct contact with the contents being shipped
 - ✓ Handover the shipping box to the patient and kindly ask him / her to unpack / package the product
- ✓ Do not discuss with the participant/designee anything related to the study or their medical condition but redirect them to their investigator site
- ✓ All patient information must be protected from access by unauthorized persons and treated as confidential

Note: Comply with the relevant authorities (e.g., appropriate Ministry of Health, World Health organization, etc.) recommendations regarding appropriate protective gear.

Note: This is the standard process - always verify with your customer service representative, if there are any crisis specific instructions which you should follow during DTP and/or DFP shipments

Checklist:

Collection from site

- Driver to check the temp. logger is running and temperature is within range
- Site representative to pack the contents inside the container
Site representative to sign the AWB as the Shipper
- When Marken have implemented a 'No Contact' Policy, please sign and date on the HAWB confirming shipment pick up**
- Close and seal the shipping container with tape
- Additional study specific instructions:**

Delivery to Patient

- Request to see a government issued photo identification for recipient name on the Rapid Response Booking Form and confirm their identity. *Do not deliver the shipment to anyone else*
- When Marken have implemented a 'No Contact' Policy, please verbally confirm the patient or their representative's ID**
- Retrieve temperature monitor and check for alarms
- No Alarm:** continue **Alarm:** **(PM to amend with additional steps as needed)**
- Recipient to sign in the designated spot on the Rapid Response DTP/DFP Booking Form
- When Marken have implemented a 'No Contact' Policy, please sign on the booking form and note the following: 'Patient [insert patient name] ID was verbally verified, and shipment delivered on [insert date]' and sign and date**
 - Additional study specific instructions:**

Post Delivery:

- Ensure that the completed shipment documentation is returned to your dispatch office within 48 hours and store any original DTP documentation in a secure location with limited access until further notice
- Additional study specific instructions:**

MF-PCS-015 Version 04

Direct-From-Patient (DFP) Driver Instruction Checklist

Note: If you have not completed DTP Driver Training with Marken, you may not handle this shipment

Reminders:

- > State you represent Marken and are picking up/delivering a shipment
- > Do not cross the threshold of a participant's home under any circumstance
- > Avoid direct contact with the contents being shipped
- > Do not discuss with the participant/designee anything related to the study or their medical condition but redirect the them to their investigator site
- > All patient information must be protected from access by unauthorized persons and treated as confidential

Comply with the relevant authority (e.g., appropriate Ministry of Health, World Health Organization, etc.) recommendations regarding appropriate protective gear.

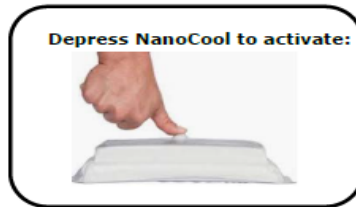
Checklist:

Collection from subject, DRIVER TO:

- Arrive with a NanoCool box and depress the button to activate the cooling
- Open the NanoCool and remove the cooling engine
- Allow subject to place contents inside NanoCool box
- Replace the cooling engine
- Close and seal the shipping container with tape
- Sign the Marken AWB as collected in good order and condition (driver only signs)
- Record Pickup On Board (POB) milestone in xMaestro

Delivery to site, DRIVER TO:

- Handover of the box
- Sign the Marken AWB as delivered in good order and condition (driver only signs)
- Record Proof Of Delivery (POD) milestone in xMaestro
- Return completed AWB and completed Driver Instruction Checklist to Marken office within 24-hours of delivery



HAWB#: _____

Checklist completed by: _____
Driver Print Name / Signature / Date



Driver ONLY to handle the box & TT4 – SITE must only handle the IMP (medication) !

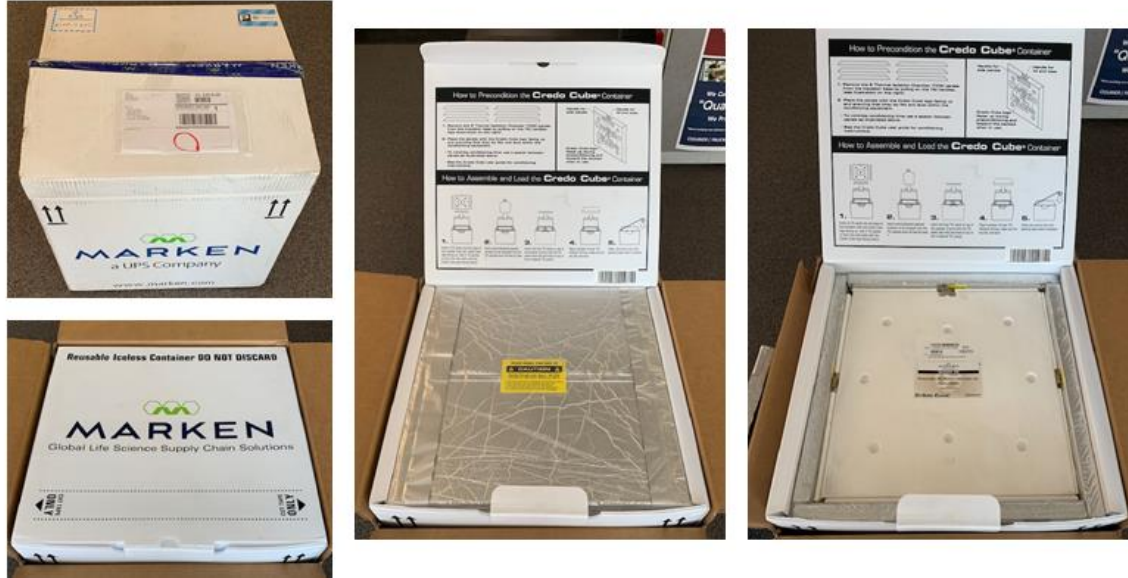
- ✓ Credo box is pre-conditioned to **2-8°C, OR 15-25°C**
- ✓ **Credo must be packed as quickly as possible** to avoid temperature excursions during packing process.
- ✓ **TT4 must remain in the Credo box at all times** – please advise the site if needed?
- ✓ *Receive ancillary material from the site in a second corrugated box (uncontrolled transportation). Do not place ancillary material inside Credo.*

MARKEN COOLGUARD DISPOSABLE PACKAGING



DID YOU KNOW, COOLGUARD DISPOSABLE PACKAGING IS 100% BIODEGRADABLE?!

MARKEN CREDO REUSABLE PACKAGING



MARKEN CREDO REUSABLE PACKAGING

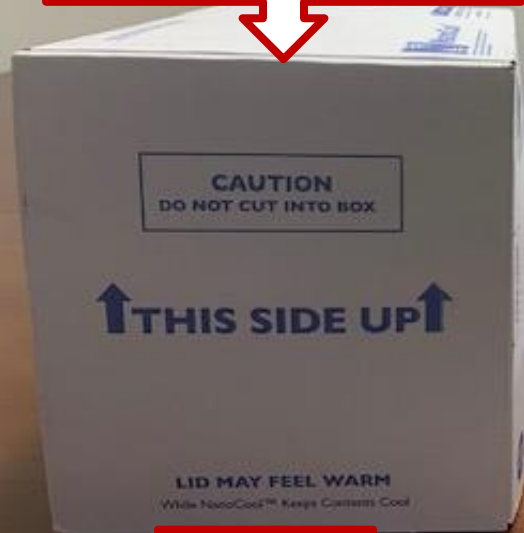


MARKEN REUSABLE SMART BOX CREDO



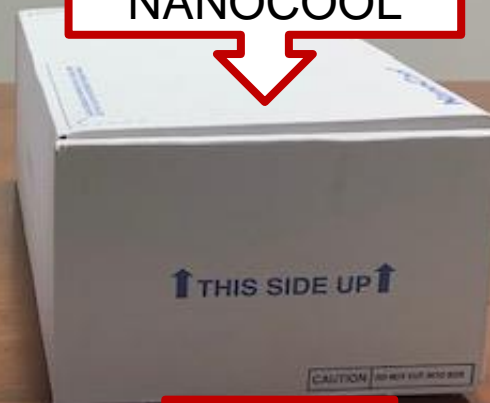
For All Slides with Two Images
NanoCool on the Left and Mini NanoCool on the Right

NANOCOOL



12x8x9

MINI
NANOCOOL



12x8x5

NANOCOOL AND MINI NANOCOOL



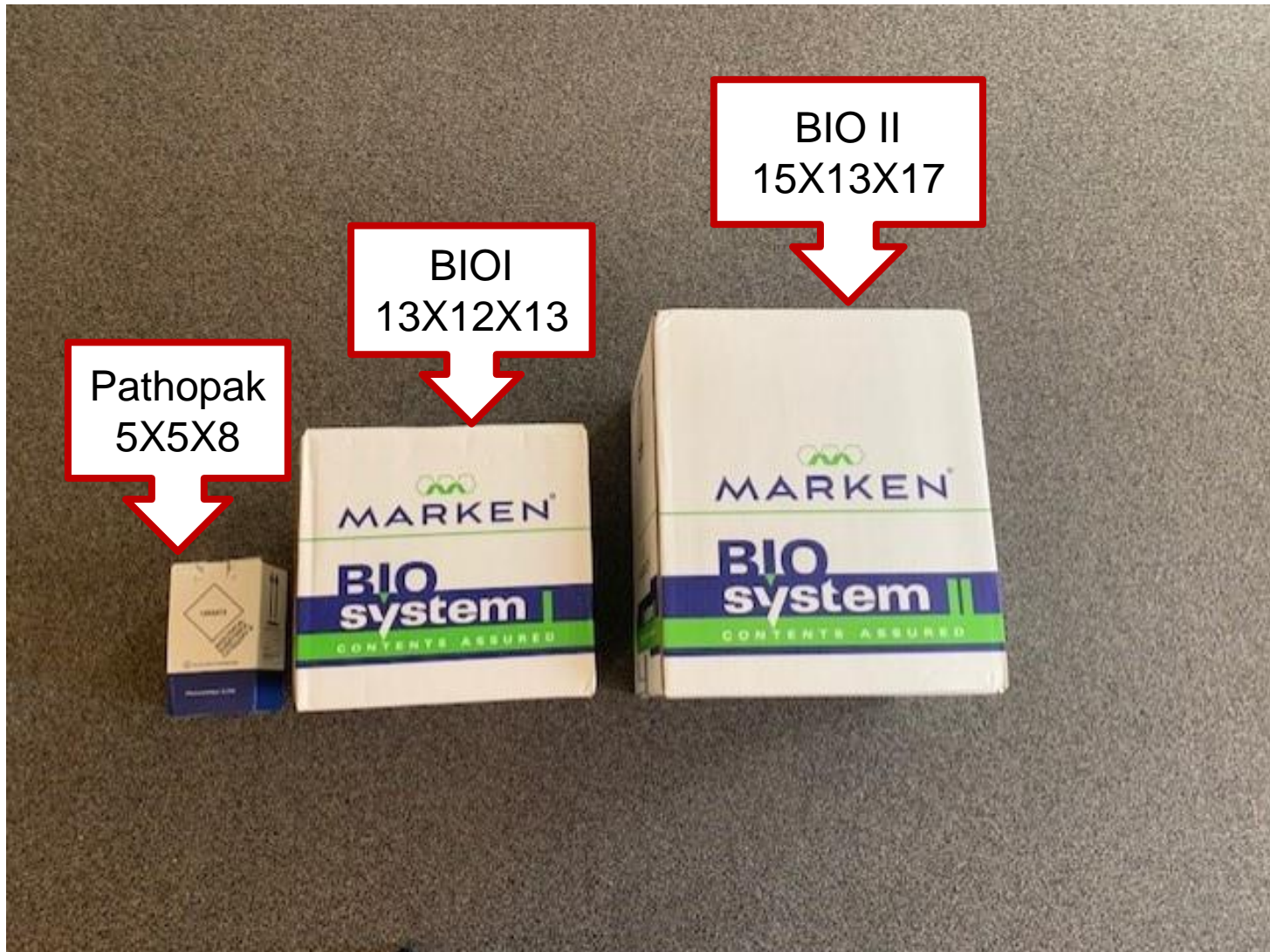
NANOCOOL AND MINI NANOCOOL



To activate the NanoCool Engine press the button down (Sample not pressed).
Once activated (around a minute) the word NanoCool will become dark blue.



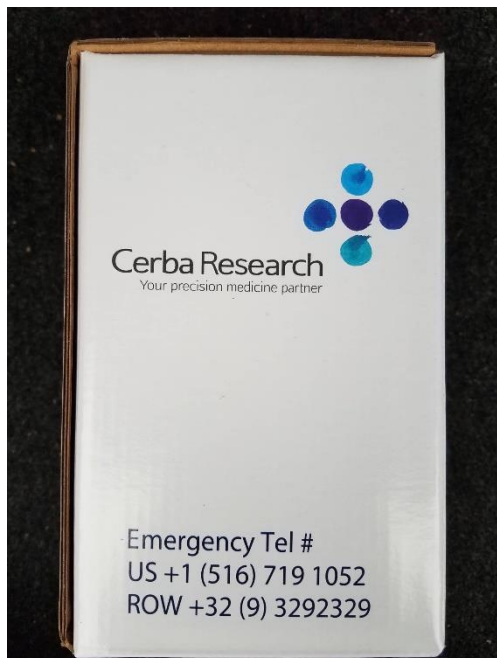
MARKEN BOX EXAMPLES





 Shot on BV9600 E
Powered by Blackview

Dimensions 5x5x8



Place the Marken HAWB on one side labeled UN3373 (there are two sides labeled UN3373)

TT4 TEMPTALE ULTRA Instructions at pickup site

1. Write down temp
2. Check for alarm (If you see a flashing X, you must call the Marken Team or your site dispatch before proceeding!)
3. Press GREEN start buttons 4 seconds (This sets a date/time stamp for when meds have been placed into the Credo/Coolguard)

TT4 TEMPTALE ULTRA Instructions at delivery (patient home)

1. Write down temp
2. Check for alarm (If you see a flashing X, you must call the Marken team or your site dispatch before proceeding!)
3. Stop TT4 (press RED stop button hold down 5 seconds) This sets a date/time stamp for when meds have been removed from the Credo/Coolguard) and shuts the TT4 down.



TT4 running, alarmed.



TT4 serial number/bar code.

TT4 TEMPTALE ULTRA Instructions at pickup site

1. Write down temp
2. Check for alarm (If you see a flashing X, you must call the Marken Team or your site dispatch before proceeding!)
3. Press GREEN start buttons 4 seconds (This sets a date/time stamp for when meds have been placed into the Credo/Coolguard)

TT4 TEMPTALE ULTRA Instructions at delivery (patient home)

1. Write down temp
2. Check for alarm (If you see a flashing X, you must call the Marken Team or your site dispatch before proceeding!)
3. Stop TT4 (press RED stop button hold down 5 seconds) This sets a date/time stamp for when meds have been removed from the Credo/Coolguard) and shuts the TT4 down.



TT4 stopped, no alarm.



TT4 stopped, alarmed.

The TempTale[®] Ultra temperature monitor can be programmed with custom start-up delays, measurement intervals, and time-temperature alarm settings.

Starting a TempTale[®] Ultra Monitor

- Press and hold the Start button (1 – 3 seconds) until the Sunshine icon ☀ appears in the upper left corner of the LCD screen (1). The LED (2) will blink GREEN (if LED startup option was programmed) to indicate that the monitor has started.
- The TempTale Ultra will begin to record data after the programmed start-up delay period has passed.

Marking an Important Event (Date Stamp)

- To mark an event while the monitor is recording, press and release the Start button. An Arrow ↑ icon will appear briefly in the top of the LCD screen and trip summary data will appear.
- Press and release the Start button to cycle through the trip summary data. Data appears in the following order:
 - Average temperature
 - Min. recorded temperature
 - Max. recorded temperature
 - Total time above high limit
 - Total time below low limit
 - Current temperature reading (This is a programmable option.)



Alarming

When the TempTale Ultra monitor is exposed to temperatures outside the programmed alarm limits, an X will appear at the top of the screen. The ▲ icon will display if the high alarm was triggered, the ▼ icon will display if the low alarm was triggered.

Stopping a TempTale Ultra Monitor

There are two ways to stop a TempTale Ultra monitor:

- Press and hold the Stop button (1 – 3 seconds) until the Stop icon ● appears in the upper right corner of the screen.
- Plug the monitor into a USB port on a computer or printer.

Receiving a TempTale Ultra Monitor

- Recover the TempTale Ultra monitor, then press and hold the RED Stop button (1 – 3 seconds) to manually stop the unit.

NOTE: If the monitor is not stopped manually, the TempTale Ultra monitor will continue to record data until it is plugged into a USB port on the computer or until the programmed trip length is reached.

- Verify the "Stop" icon ● is visible on the display.

Retrieving TempTale Ultra Monitor Data Files

- Plug the monitor into a USB port on the computer. The LED will blink RED while the Adobe[®] PDF report and TTV data file are being created. When the RED LED stops blinking and displays solid GREEN, the file generation process is complete. The files are now accessible on a removable drive (Windows[®] F, G, I, and J).

NOTE: Do not disconnect the monitor from the USB port while the RED LED is blinking.

Managing and Viewing TempTale Ultra Monitor Files

- If the computer has Adobe PDF compatible reader software installed, double-click the PDF file icon to open and view the PDF file.
- If the computer has Sensitech's TempTale Manager, Desktop Software installed (8.0 or higher), double-click the TTV file icon to open and view monitor configuration information, summary statistics, and time-temperature data graph.
- Both the PDF and TTV files can be copied, saved, or emailed as an attachment.

Direct USB Printing of PDF Reports

- To place the monitor in Direct Print mode, press and hold the Start and Stop buttons simultaneously until the RED LED starts blinking. The monitor is now in Direct Print mode.

NOTE: Direct Print times out after approximately 10 seconds. If time out occurs before the monitor is connected to a USB port, repeat the previous step.

- While the LED is blinking, plug the monitor into the USB port located on the exterior of a USB-enabled printer, and then print the PDF report.

NOTE: Not all USB printers support USB-direct printing of PDF documents. Consult your printer's user manual for support.

Displayed Information

Sample running display, no alarm

Sample stopped display, with alarm

1. Temperature display indicator

2. Running

3. Start-up delay

4. Record point

5. Alarm Status

☀ - alarm; ✓ - no alarm

6. Current temperature (pre-programmed to display °C or °F)

7. Alarm triggered ▲ High / ▼ Low

8. Trip summary recording

9. Average/Max temperature recorded

10. Total time above/below alarm limits

- ✓ **At no time can any Driver, Dispatcher or Office (AMEX or AGENT) call the Pickup Site or the Patient. All correspondence must go through Marken Only!**
- ✓ At the door of the patient's home, the uniformed driver will state that he or she represents Marken and present photo identification indicating his or her name and company.
- ✓ **At no time should the driver cross the threshold and enter the patient's home under any circumstances.**
- ✓ **The driver will request to see a government issued photo identification for the patient (as named on the booking form ONLY) to confirm identity of the recipient.**
- ✓ He or she will document that identity was confirmed in the appropriate area on the shipment paperwork (BOOKING FORM AND/OR DRIVER CHECKLIST).
- ✓ If the patient (as named on the booking form) is not available, **the shipment will not be delivered by the driver.** Further instruction will be requested by MARKEN from the site / client.

Patient Data Confidentiality:

- All MARKEN offices and drivers are trained on the importance of treating patient data with confidentiality.
- Drivers are not allowed to talk to the patients about their disease or treatment.
- All involved will ensure that patient data is not shown on client documents such as reports, waybills and invoices. **Build corresponding jobs and report POD by Patient ID # only.**

MARKEN DATA PROTECTION GUIDELINES



MF-DTP-004 Version 06
Project ID: 1

MARKEN

PATIENT HOME PICK-UP (DPP)/DELIVERY (DTP) BOOKING FORM

Client Name: Client Account: Site:	Booking Template Numbers DTP#: _____ DTP#: _____	Airway Bill Numbers: DTP: _____ DTP: _____
Picking Address: _____ _____ _____ _____ _____ Street Name: _____ State: _____ Postal Code: _____		Container Shipping Conditions (Qty): <input type="checkbox"/> Ambient (uncooled) _____ Dimension: _____ <input type="checkbox"/> Ambient (+1 to 20°C) Dimension: _____ <input type="checkbox"/> Refrigerated (+2 to +8) _____ Dimension: _____ <input type="checkbox"/> Frozen _____ Dimension: _____ <input type="checkbox"/> Control _____ Dimension: _____ <input type="checkbox"/> DTP (shipment only) <input type="checkbox"/> DTP and return shipment to site (DPP) <input type="checkbox"/> DTP (shipment only)
Delivery Address: _____ _____ _____ _____ _____ Street Name: _____ State: _____ Postal Code: _____		Pick up Date: _____ Pick up Time: _____ Delivery Date: _____ Delivery Time: _____
Subject / Patient ID No (MANDATORY): Please enable patients to track shipments in real time by following Marken provided link. Does the patient want to utilize Visio? <input type="checkbox"/> Yes, wants to utilize Visio services, include patient's email address or mobile phone number <input type="checkbox"/> No, does not want to utilize Visio services		
Received by (DTP only): _____ (DTP name) Signature: _____ Date: _____		
Investigator Booking Process Instructions 1. Fill in the details above. 2. At least 72 business hours prior to the picking date, email the form to please indicate corresponding Marken e-mail address or call please indicate corresponding Marken phone number • Within 1 business day, a receipt confirmation will be sent via email or phone from Marken		
Temperature handling - if applicable (to be completed by the Marken Driver): Serial No. of the used Device: _____ Temperature excursion: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> *NOTE: Marken driver (MSD) should be aware that the drug product is not to be used if temperature excursion has occurred with the shipment until further notice from the clinical site/sponsor.		
Driver / Dispatcher Instructions: Please ensure that the completed document is returned to your dispatch office within 48h and original DTP document are retained in a secure location with limited access until further notice.		

Issue Date: 12/04/2024
Market Locations: 1070-1071-1072 & 1073-1074-1075 Page 1 of 1

As a driver typically, you will see following patient personal data on the DTP booking form:

- ✓ name
- ✓ address
- ✓ geo-location information (that is via online maps/ GPS called Visio);
- ✓ (personal or work) phone number
- ✓ (personal or work) email address
- ✓ the relationship of the legal representative to the patient (possibly)
- ✓ clinical trial protocol number or other reference relating to the clinical trial study

YOUR DATA PROTECTION ROLE



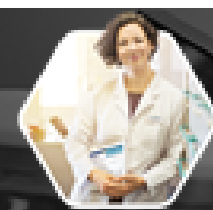
All material you handle on Marken's behalf is confidential!

Always make sure that personal data is properly protected whilst in your care:

- ✓ Don't leave documents unattended or accessible to others
- ✓ Never take personal data home at the end of your shift
- ✓ Don't show or hand these documents to individuals other than authorized Marken or LSP individuals
- ✓ Drivers must give all documentation, to your customer service team member, line manager or other authorized LSP representative
- ✓ Don't disclose or allow others access to any patient's personal data (e.g. ensure Booking Form is removed before handing over the shipment to a laboratory)
- ✓ Immediately report any loss or theft of: Device, booking form, waybill, Paper or electronic record
- ✓ Secure and protect your work phone



YOUR DATA PROTECTION ROLE



Respect the privacy of patients, their legal representatives and any other individuals:

- ✓ Don't take a picture of the patient's or legal representative's ID card
- ✓ Don't talk to the patient about his/her health condition
- ✓ Don't post on social media or the internet any information about your shift, the route or any patient personal data
- ✓ If possible, avoid having work conversations in public
- ✓ Do not store or record any work related data on your personal devices or personal accounts

AT PATIENT HOME – PRIOR TO HANDOVER OR PICK UP



- ✓ All patient information must be protected from access by unauthorized persons and treated as confidential at all times. Especially the MF-DTP-004 Booking Form is only to be shared with Marken, relevant site and Patient only – any other party is considered as unauthorized!
- ✓ If the patient has questions regarding delivery / collection or scheduling of deliveries / collections, you should direct them to call Marken at the contact number provided
- ✓ Avoid direct contact with the product that is being delivered / collected. Handover the shipping box to the patient and kindly ask him / her to unpack / package the product
- ✓ For DTP Home Delivery the driver will request to see a government issued photo identification for the patient or representative (as named on the booking form ONLY) to confirm identity of the recipient. If the patient (as named on the booking form) is not available, the shipment will not be delivered by the driver. Further instruction will be requested by MARKEN from the site / client. Document that identity was confirmed in the appropriate area on the shipment paperwork.
- ✓ For DFP Home Pick Up no identify verification is needed. Driver can pick up shipment from many person at the patient home

THANK YOU!