POLICIES AND PROCEDURES

GOVERNING RESEARCH WITH HUMAN PARITICIPANTS

INSTITUTIONAL REVIEW BOARD (IRB)
FOR THE PROTECTION OF HUMAN SUBJECTS

Federal IRB Registration Number 00002445

SOUTHERN UNIVERSITY – BATON ROUGE

Federalwide Assurance (FWA) Number 00002518

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I. Policies

I.A. Introduction

The Vice-Chancellors for Research at Southern University – Baton Rouge (SU-BR) and the Southern University Agricultural Research and Extension Center (SU Ag Center) are responsible for research on their campuses. However, at the present time and within these policies and procedures, the Vice-Chancellor for Research at SU-BR (herein referred to as the "Vice-Chancellor for Research") is the institutional official responsible for all research conducted by SU-BR and SU Ag Center faculty, staff, and students and external researchers who engage in research on the SU-BR and SU Ag Center campuses. Under the auspices of the Vice-Chancellor for Research, it is the responsibility of the Institutional Research Oversight Committee (herein referred to as the "IROC") to ensure that research is conducted within federal regulations, state statutes, institutional polices, and ethical principles and to address research misconduct. The SU-BR Human Protection Administrator (herein referred to as the "Human Protection Administrator") presently chairs the IROC and is the Research Integrity Officer, and IROC committee members include the chairpersons of SU-BR's four research-risk committees: Institutional Review Board for the Protection of Human Subjects (herein referred to as the "IRB"), Institutional Animal Care and Use Committee, Biohazards Safety Committee, and Recombinant DNA Committee. Within the SU-BR and SU Ag Center research structures, the IRB has primary responsibility for ensuring that research involving human participants is reviewed and approved within federal regulations, state statutes, and institutional policies, and ethical principles.

The IRB has been registered with the Department of Health and Human Services (DHHS) Office for Human Research Protections (OHRP) (# 00002445), and SU-BR has federalwide assurance (FWA) (# 00002518). Within its FWA agreement, SU-BR has assured that its and the Southern University and A&M College System Agricultural Research and Extension Center (herein referred to as the "SU Agricultural Center") research with human participants, regardless of the source of support, shall be guided by the ethical principles in the Belmont Report (see Appendix A or http://ohrp.osophs.dhhs.gov/humansubjects/guidance/belmont.htm). SU-BR has also agreed to apply the Common Rule and subparts B, C, and D of the Department of HSS and the Code of Federal Regulations Title 45 Public Welfare Part 46 Protection of Human Subjects (45 CFR 46) to all of its human participants research (see Appendix B or http://ohrp.osophs.dhhs.gov/humansubjects/guidance/ 45cfr45.htm).

As stated on the OHRP Web site (http://www.hhs.gov/ohrp/about/), the OHRP provides leadership and oversight on all matters related to the protection of human participants participating in research conducted or supported by the U.S. Department of Health and Human Services (DHHS). OHRP helps ensure that such research is carried out in accordance with the highest ethical standards and in an environment where all who are involved in the conduct or oversight of research with human participants understand their primary responsibility for protecting the rights, welfare, and well-being of participants. OHRP:

- establishes criteria for and approves assurances of compliance for the protection of human participants with institutions engaged in DHHS conducted or supported human participant research;
- provides clarification and guidance on involving humans in research;
- develops and implements educational programs and resource materials; and
- promotes the development of approaches to enhance human subject protections.

Research projects involving human participants conducted under the auspices of SU-BR and the SU Agricultural Center by SU-BR faculty, staff, or students or by external investigators at either campus must receive approval before the research is initiated. The information in this policies and procedures manual is designed to provide principal investigators and research project personnel with the guidelines and process for obtaining initial approval (no more than one year- §46.109[e]) and approval for continuation (no more than one year - (§46.109[e]). Those principal investigators who have questions about ethical practices and federal regulations relating to the use of human participants in research should obtain and read the Belmont Report and 45 CFR 46. Reading these documents and DHHS OHRP guidance/educational materials and completing the online human participant training session will provide principal investigators with a better understanding of the reasons for review of research with human participants, the ethical principles that govern such research, and the statutory basis or enactment of these principles. Where the purpose of the research involves the application of the Code of Federal Regulations of other regulatory agencies (e.g., U. S. Food and Drug Administration [FDA]), the IRB shall apply these regulations (e.g., CFR Title 21). If principal investigators have questions about the requirement for completing training in the use of human participants, they should contact the Chairperson of the IRB.

It is the intention of the IRB to review and revise these policies and procedures yearly to ensure compliance with needed regulations and to provide guidelines to SU-BR, SU Agricultural Center, and external researchers. Questions, comments, and suggestions regarding this manual or the IRB research project review and approval process should be sent to the Human Protection Administrator and Chairperson of the IROC:

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I.B. Code of Research Ethics

In 1971, the United States Department of Health, Education, and Welfare issued ethical guidelines that became federal regulations in 1974. Four years later, in 1978, the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research published the *Belmont Report*, which identified three basic ethical principles that were used to develop the current Common Federal Policy for the Protection of Human Research now adopted by numerous federal departments and agencies. These principles include: (a) Respect for Persons (Autonomy) – human participants have dignity and freedom and their consent to participate is required; (b) Beneficence – investigators must maximize benefits and minimize risks and research-related risks must be reasonable with respect to expected benefits; and (c) Justice – the human participant recruitment and selection process is equitable and ensures fair treatment (see Appendix A). This present Federal policy, the Common Rule that was codified as the *Common Federal Policy for the Protection of Human Subjects* and published in 1991 in the *Federal Register*, is referred to as 45 CFR 46. Title 45 CFR Part 46 regulations (see Appendix B) require and guide the actions of an IRB, and thus, the IRB is governed by 45 CFR 46 regulations and the principles set forth in the *Belmont Report*.

I.C. Responsibilities of the IRB

The IRB is responsible for the review of all SU-BR and SU Agricultural Center research projects using human participants (§46.101; §46.103). The IRB will be comprised of the Chairperson and members appointed by the Vice-Chancellor for Research for two-year terms. The composition of the IRB will include representatives from faculty and members of the community (§46.107). A student representative, with non-voting status, may also be appointed to the IRB. Nominations for IRB membership should be submitted to the Vice-Chancellor for Research who will then consult with the Human Protection Administrator and Chairperson of the IRB to assure that pertinent SU-BR and SU Agricultural Center units and the community are adequately represented in the makeup of the membership.

Based on the Code of Federal Regulations (45 CFR 46), the Chairperson of the IRB shall determine if a research project submitted for review is exempt (§46.101), eligible for an expedited review (§46.110), or requires a full or convened review (§46.108[b]**)**. The Chairperson, on behalf of the IRB, can approve exempt research with or without revisions. The Chairperson, in collaboration with individual IRB members or an ad hoc IRB committee can expedite research projects and approve these projects with or without revisions. During the expedited review process, a third party, with knowledge about the protocol or with work experiences with the proposed participants, may also be asked to review the research and make recommendations (§46.107[f]).

Approval of research projects necessitating a full review requires a quorum of the convened IRB, and minutes shall be taken at these meetings. The scheduled meeting to review the proposed research must have a quorum, a majority vote is needed to

approve or disapprove the research project, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for, against, and abstaining; the basis for requiring changes in or disapproving research; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]). If any IRB member has a potential conflict of interest with respect to the review of a research project (e.g., his or her research has been submitted for IRB approval), the member must declare this in advance of a review and not participate in voting on the research project (§46.107[e]). However, and as is true for any principal investigator (applicant) submitting a research project for approval, an IRB member can provide requested information to the IRB in his or her role as a research investigator.

It is the responsibility of the Chairperson of the IRB to retain, file, update, and monitor all documentation that will include, at a minimum: (a) IRB membership, members' expertise/competencies, school/unit represented, dates for appointments and renewals, and so forth; (b) minutes of IRB meetings, including the attendance and voting record on research projects reviewed and policy issues discussed; (c) research projects reviewed and the decision on each; (d) research projects in the queue for approval; and (e) appeals in the queue and those concluded with documentation of the decisions (§46.115). The Chairperson shall also establish a database of pertinent information, including but not limited, to the following: (a) the dates of reviews and decisions; (b) the dates that investigators must submit reports; (c) the dates that the IRB must convene to re-review approved research projects that required a full review; and (d), a computation of types of research reviewed, categories of researchers, and other data required on the IRB forms (§46.115).

Although this policies and procedures manual outlines the appeal process for principal investigators who do not agree with the decision of the IRB and SU-BR and the SU Agricultural Center have due process procedures, in accordance with SU-BR's FWA terms of agreement (http://www.hhs.gov/ohrp/humansubjects/assurance/filasurt.htm), all human participant research to which the FWA applies, except for research exempted or waived in accordance within the Code of Federal Regulations (46:101[b] or 46:101[i]), will be reviewed, prospectively approved, and subject to continuing review at least annually by the IRB. The IRB has authority to approve, require modifications in, or disapprove the covered human participant research (§46.109). For research approved by the IRB, further appropriate review and approval by any department or agency conducting or supporting the research or by officials of the institution holding the FWA may be required. Also, under federal regulations (46:113), the IRB has the authority to suspend or terminate approval of research that is not being conducted in accordance with the IRB's requirements, has been associated with unexpected serious harm to human participants, or present other problems or concerns (e.g., violation of Louisiana statutes, SU-BR and SU Agricultural Center policies, or ethical principles). A research project may also be suspended if there are problems or concerns with conflict(s) of interest, the practices of the principal investigator or research project personnel, or the credibility of functionality of the research site. In emergency cases, the Chairperson of the IRB, alone or in collaboration with others (e.g., the Human Protection Administrator,

individual IRB members, an ad hoc IRB committee, a third party), can suspend or terminate research when there is unexpected serious harm to participants. If the Chairperson of the IRB is not available, the Human Protection Administrator, the Chairperson of the IROC, or the Vice-Chancellor of Research can suspend or terminate a research project or research privileges.

I.D. Compliance for SU-BR, SU Agricultural Center, and External Investigators

Research projects conducted by SU-BR and SU Agricultural Center faculty, staff, and students and external principal investigators or research project personnel conducting research on either campus that involve human participants and have as their purpose contributing to the generalizable knowledge base must receive approval from the IRB before the research is initiated. SU-BR and SU Agricultural Center faculty, staff, and students serving as key personnel in a research project where the principal investigator is at another university or agency must comply with the requirements of these policies. Further, research involving human participants conducted by SU-BR, SU Agricultural Center, or external investigators that is sponsored by SU-BR or the SU Agricultural Center, uses either campuses' property or facilities, or uses either campuses' non-public information to contact or identify prospective participants must also receive approval.

SU-BR and SU Agricultural Center faculty, staff, and student inquiries that are internal to the campuses (e.g., SU-BR student class projects, journalistic interviews, faculty or peer surveys, etc.), clinical practices (e.g., SU-BR nursing, speech/language pathology), and evaluative projects (e.g., personnel, student, or program evaluation) are not considered research projects if the purpose of the inquiry is to generate data that will not be (a) generalized, (b) added to the existing literature or knowledge base, or (c) used to develop presentations or publications for external audiences. Also, the systematic investigation of publicly available archival records is not considered as research with human participants.

For course-based or related inquiries, the SU-BR professor of record or SU Agricultural unit administrator is to serve as the "Principal Investigator" and ensure the impartial selection and ethical treatment of human participants. For school- or unit-based inquiries, the school/unit's administrator or designee shall serve as the "principal investigator" and ensure the impartial selection and ethical treatment of human participants.

I.E. Criteria for Evaluation

The IRB shall determine that all of the following requirements are satisfied to approve research involving human participants (§46.111):

> (1) Risks to [participants/subjects] are minimized: (i) by using procedures which are consistent with sound research design and which do not unnecessarily expose [participants] to risk, and (ii) whenever appropriate, by using procedures

already being performed on the [participants] for diagnostic or treatment purposes.

(2) Risks to [participants] are reasonable in relation to anticipated benefits, if any, to [participants], and the importance of the knowledge that may reasonably be expected to result. In evaluating risks and benefits, the IRB should consider only those risks and benefits that may result from the research (as distinguished from risks and benefits of therapies [participants] would receive even if not participating in the research). The IRB should not consider possible long-range effects of applying knowledge gained in the research (for example, the possible effects of the research on public policy) as among those research risks that fall within the purview of its responsibility.

(3) Selection of [participants] is equitable. In making this assessment, the IRB should take into account the purposes of the research and the setting in which the research will be conducted and should be particularly cognizant of the special problems of research involving vulnerable populations, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons.

(4) Informed consent will be sought from each prospective [participant] or the [participant's] legally authorized representative, in accordance with, and to the extent required by §46.116.

(5) Informed consent will be appropriately documented, in accordance with, and to the extent required by §46.117.

(6) When appropriate, the research plan makes adequate provision for monitoring the data collected to ensure the safety of [participants].

(7) When appropriate, there are adequate provisions to protect the privacy of [participants] and to maintain the confidentiality of data.

(b) When some or all of the [participants] are likely to be vulnerable to coercion or undue influence, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons, additional safeguards have been included in the study to protect the rights and welfare of these [participants].

Ethical Principles

During the research project proposal review process, the IRB shall be concerned with a number of ethical principles pertaining to the protection of human participants, including benefits vs. risks, informed consent, privacy and confidentiality, and population and sample selection, research design, interventions, instrumentation, and data collection and analyses. The use of vulnerable populations (e.g., research involving minors/children, pregnant women and fetuses, prisoners, individuals with specific disabilities, and individuals who are economically or educationally disadvantaged) and

proposals for selected funding agencies (e.g., National Institutes of Health [NIH]) will also create specific, regulation-directed evaluative considerations.

Benefit(s) vs. risk(s) acknowledges that a degree of risk accompanies most research, but that risks must be reasonable in relation to the potential benefits (e.g., one minimal risk is the loss of confidentiality). Therefore, this principle requires that the principal investigator maximizes benefits and minimizes risks associated with human participants. In evaluating this criterion, the IRB shall particularly focus on any potential risk due to research-related physical, psychological, social, or economical threats. Essentially, the decision to identify a research project as exempt, qualifying for an expedited review, or requiring a full or convened review is based upon the potential magnitude or degree of risk in relation to expected benefits as presented by the research and the participants involved. For example, exempt research generally involves human participants in non-compromised situations where the degree of potential risk is low or practically nonexistent. Research qualifying for an expedited review should present no more than a minimal risk and pertain to only certain procedures. Strictly adhering to the principles of informed consent and privacy and confidentiality is the major safeguard in minimizing the risks in most social science research. Regarding benefits, the principal investigator must understand and be able to articulate the potential benefits or significance of the research, particularly with vulnerable populations (i.e., research with human participants cannot be conducted simply for the sake of research).

Informed consent (regarding applicable research) requires that human participants freely agree to participate, and within this agreement, they understand the extent and elements of their involvement. It also necessitates documentation of that consent, unless a wavier is granted by the IRB. Participants should understand the general intent of the research (as reasonably as possible), the benefits and risks resulting from their involvement, and the conditions for their withdrawal or their termination without penalty. The basic and additional elements of consent the principal investigator should address in a Research Permission Form or Consent to Participate Form are listed below. The specific procedures the principal investigator shall use to ensure comprehension and obtain informed consent from vulnerable populations must be described (e.g., minors/children, pregnant women, individuals with specific disabilities, and persons who are economically or educationally disadvantaged).

The basic elements of consent include:

- State Purpose of the Research Study and Procedures
- Describe Possible Risks or Discomforts.
- Describe Possible Benefits to Participants or Others.
- Disclose Available Alternative Courses of Treatment.
- Describe Available Medical Treatment for Adverse Experiences (Greater than Minimal Risk).
- Describe the Extent of Confidentiality.
- Delineate Whom to Contact about the Research.

- State the Following: Participation is Voluntary; Refusal to Participate Involves No Penalty or Loss of Benefits to which the Participants are Otherwise Entitled; Participants May Discontinue Participation Without Penalty or Loss of Benefits to which the Participants are Otherwise Entitled.

Additional elements of consent include

- State the Procedure May Involve Currently Unforeseeable Risks to the Participants, or Fetuses if the Participants Become Pregnant.
- Describe Anticipated Circumstances Under Which Participation may be Terminated by the Investigator without Regard to the Participants' Consent.
- Disclose Additional Cost to Participants as a Result of Participation.
- Describe Circumstances of a Decision to Withdraw from the Study and Procedures for Orderly Termination.
- State that Significant New Findings that May Relate to Participants' Willingness to Continue Participation will be Disclosed to the Participants.
- State the Possible Number of Participants Involved in the Study.

The IRB shall focus on the privacy and confidentiality mandate that the principal investigator assures that the data collected cannot be linked to the research participants, unless explicit consent is obtained. This may require that participants are unknown by identifiers to the principal investigator or research project personnel; identifiers are replaced by a coding system that makes it impossible to trace the reported data back to any participant. In general, questionnaires, inventories, interview schedules, and other data-gathering instruments and procedures for experimental and non-experimental research must be carefully constructed to limit personal identifiers to those essential to the purpose(s) of the research. Again, and where possible, participant data should be coded to remove all personal identifying information and data that have the potential to reveal participants' identities should be stored in locked or protected files that are accessible only to the principal investigator and authorized research project personnel. If data are to be collected using "non-research project persons" or "drop boxes," the specific procedures for ensuring privacy and confidentiality with these data collection systems are to be described in detail. If the research protocol requires audio or video taping of human participants, participants' informed consent must be secured before the taping. The principal investigators must also indicate how consent for the use of these tapes for internal or external presentations will be obtained (i.e., a waiver of the normal confidentiality of research data). Investigators must also describe how greater care will be used for the treatment of more sensitive research data (e.g., information that could put the participants at risk of criminal or civil liability or be damaging to the participants' employability or financial standing).

Population and sample selection require the use of a method that results in a fair and equitable selection of human participants for research purposes (e.g., identifying the population, conducting a power analysis to determine sample size, and randomly selecting the sample). Selection of human participants should take into consideration

the purpose(s) of the investigation, the setting(s) where the research will be conducted, the use of sound methodological principles and procedures and interventions, and the population from which participants will be recruited (e.g., individuals who are vulnerable cannot be involved in research for convenience or because they can be easily manipulated). The IRB shall also focus on how the principal investigator (a) selects the population and sample, (b) protects and ensures the voluntary participation of participants where there is an investigator- participant relationship (e.g., professor - student), (c) describes how needed permission(s) will be obtained from other appropriate entities or individuals prior to initiating research (e.g., IRB at another university), and (d) addresses human participants training criteria or the inclusion of specific groups (e.g., women and minorities) where appropriate to the purpose(s) of the study and the research methodology (e.g., National Institutes of Health [NIH] guidelines - see training notice below). As required by 45 CFR 46:304(b), the IRB shall augment its membership when it reviews proposals involving prisoners (e.g., appoint a prisoner or a prisoner representative with the appropriate background and experiences). For research involving other vulnerable populations (e.g., children, individuals with cognitive impairments, pregnant women, the elderly, individuals who are economically or educationally disadvantaged), the IRB may add to its membership individuals who are knowledgeable about the protocol or have work experiences with these proposed participants (§46.107[f]).

Next, the IRB shall focus on the methodology the principal investigator will use to conduct the research, including research design, statistical analyses (e.g., meeting assumptions), instrumentation (e.g., valid and reliable measures), and appropriate interventions. The methodology to be used must be based on sound principles and procedures (a) to maximize the generalizability of findings and (b) ensure that human participants are not denied the best-known social science intervention or clinical treatment available (i.e., participants must be provided the standard of care available). For example, the principal investigator is not only to describe the methodology in detail but also should provide authoritative support that procedures are methodologically sound or empirically based. Also, if a social science intervention or clinical trial is being conducted and the efficacy of a certain procedure or drug has already been established, participants cannot be offered less than that of standard intervention or care. And, the principal investigator must avoid any procedures that result in unnecessary physical, psychological, social, or financial harm and terminate an experiment when its continuation could lead to death or irreparable harm.

The IRB requires that the principal investigator and appropriate research project personnel submit documentation (NIH certificate of completion) of requisite knowledge base or training in the use of human participants. This training can be accessed on the Web site of the NIH Office of Human Subjects Research (http://ohsr.od.nih.gov/). While this training module was developed for NIH staff, other institutions seeking to meet training requirements in this area can use it.

Research with Pregnant Women, Fetuses, and Neonates

Under 45 CFR 46, pregnant women are a vulnerable population (§ 46:107), and fetuses and neonates have statutory protections. The IRB shall review and approve research involving pregnant women, fetuses, and neonates following Part A regulations and specific DHHS safeguards in Part B (§ 46:201 - § 46:207). Depending on the purpose of the research, the specific participants, and the nature of the risk(s), the IRB may include in its membership individuals who are knowledgeable about the protocol or have work experiences with the proposed participants (§46.107[f]).

Research with Children

Under 45 CFR 46, children are a vulnerable population (§ 46:107). The IRB shall review and approve research involving children following Part A regulations and specific safeguards in Part C (§ 46:401 – § 46:409). By regulatory definition, children are persons who have not attained the legal age for consent to treatments or procedures involved in the research, under applicable law of the jurisdiction in which the research will be conducted. Generally the law considers any person under 18 years old to be a child. Depending on the purpose of the research, the specific children participants (e.g., characteristics, wards, and the nature of the risk(s), the IRB may include in its membership individuals who are knowledgeable about the protocol or have work experiences with the proposed participants (§46.107[f]) (e.g., wards). If children are to participate in a research project, parents or guardians must give consent and children must assent.

Research with Prisoners

Under 45 CFR 46, prisoners are a vulnerable population (§ 46:107). The IRB shall approve research involving prisoners following Part A regulations and specific safeguards in Part C (§ 46:301 – § 46:306). By regulatory definition, a "prisoner" means any individual involuntarily confined or detained in a penal institution. The term is intended to encompass individuals sentenced to such an institution under a criminal or civil statute, individuals detained in other facilities by virtue of statutes or commitment procedures which provide alternatives to criminal prosecution or incarceration in a penal institution, and individuals detained pending arraignment, trial, or sentencing (§ 46:303[c]). When reviewing research involving prisoners, the IRB shall include in its membership a prisoner or prisoner’s representative to serve as an advocate for the proposed participants.

If SU-BR and SU Agricultural Center faculty, staff, or students intend to conduct DHHS-supported research involving prisoners as participants, SU-BR must certify to the Secretary (through OHRP) that the IRB has made the seven findings required under 45 CFR 46.305(a), including the finding that the proposed research represents one of the permissible categories of research under 45 CFR 46.306(a)(2). SU-BR must send OHRP a certification letter, to that effect, which should include the name and address of the institution and specific identification of the research protocol, including the relevant grant number.

Under its authority at 45 CFR 46.115(b), the OHRP requires SU-BR to also submit to OHRP a copy of the research proposal so OHRP can determine whether the proposed research involves one of the categories of research permissible under 45 CFR 46.306(a)(2), and if so, which one. The term "research proposal" includes: the IRB-approved protocol; any relevant DHHS grant application or proposal; any IRB application forms required by the IRB; and any other information requested or required by the IRB to be considered during initial IRB review. OHRP also encourages the institution to include the following information in its prisoner research certification letter, to facilitate processing: OHRP Assurance #, RB # for Designated IRB, Date(s) of IRB Meeting(s) in which protocol was considered, including a brief chronology that encompasses: Date of initial IRB review, Date of Subpart C review, and epidemiological waivers.

Research with Individuals with Cognitive Impairments

Under 45 CFR 46, individuals with a cognitive impairment are a vulnerable population (§ 46:107). The IRB shall approve research involving individuals with cognitive impairments following Part A regulations and additional DHHS safeguards to protect the rights and welfare of these participants. According to the *Institutional Review Board Guidebook Section* D Cognitively Impaired Persons (http://www.hhs.gov/ohrp/irb/irb_chapter6.htm#g5), an individual with either a psychiatric disorder (*e.g*., psychosis, neurosis, personality, or behavior disorders), an organic impairment (*e.g*., dementia), or a developmental disorder (*e.g*., mental retardation) that affects cognitive or emotional functions to the extent that capacity for judgment and reasoning is significantly diminished. Others, including persons under the influence of or dependent on drugs or alcohol, those suffering from degenerative diseases affecting the brain, terminally ill patients, and persons with severely disabling physical handicaps, may also be compromised in their ability to make decisions in their best interests. Depending on the purpose of the research, the specific participants, and the nature of the risk(s), the IRB may include in its membership individuals who are knowledgeable about the protocol or have work experiences with the proposed participants (§46.107[f]). One of the major ethical concerns in reviewing research involving individuals with cognitive impairments will be informed consent (i.e., their capacity to understand the information presented and their ability to make a reasoned decision about participation).

Research with the Elderly/Aged

The IRB shall approve research involving the elderly following Part A regulations and additional DHHS safeguards to protect the rights and welfare of these participants. There are no specific regulations governing research with elderly participants, aside from the regulatory requirement that the IRB provides additional protections for specially vulnerable persons (§ 46:111). According to the *Institutional Review Board Guidebook Section* H Elderly/Aged Persons (http://www.hhs.gov/ohrp/irb/irb_chapter6ii.htm#g9), it is generally agreed, however, that the elderly are, as a group, heterogeneous and not usually in need of special protections, except in two circumstances: cognitive

impairment and institutionalization. Under those conditions, the same considerations are applicable as with any other, nonelderly participant in the same circumstances.

Also, there is no age at which prospective participants should become ineligible to participate in research. Most older people are neither cognitively impaired nor live in institutional settings. Although there are difficulties in recruiting and obtaining the consent of the elderly to participate in research (e.g., older persons tend to avoid research that interrupts their daily routine, is uncomfortable or inconvenient, or is not designed to provide direct benefits to them; they may be more difficult and more costly, may have hearing or vision problems, and therefore, require more time to have the study explained to them; they also drop out of studies at a higher rate than do younger participants), the inclusion of older persons in the research enterprise is important. The IRB shall ensure that the elderly are not excluded or treated specially; that older participants are protected and are not the object of disdain, stereotyping, or paternalism; and that older persons share in the benefits and burdens of research. The IRB will treat cognitive impairment in elderly participants as it treats cognitive impairment in any prospective participant. Depending on the purpose of the research, the specific participants, and the nature of the risk(s), the IRB will include in its membership individuals who are knowledgeable about the protocol or have work experiences with the elderly (§46.107[f]).

The use of age as the criterion of ability to consent, and therefore participate in research, is not valid.

Research with Individuals who are Economically and Educationally Disadvantaged

The IRB shall approve research involving individuals who are economically or educationally disabled following Part A regulations and additional DHHS safeguards to protect the rights and welfare of these participants. There are no specific regulations governing research with individuals who are economically or educationally disabled, aside from the regulatory requirement that the IRB provides additional protections for specially vulnerable persons (§ 46:111). To the extent that prospective research populations are also economically or educationally disadvantaged, the IRB shall safeguard their rights and welfare by making sure that any possible coercion or undue influence is eliminated (*e.g*., compensation that is not commensurate with the risk, discomfort, or inconvenience involved, or recruiting in institutional settings where voluntary participation might be compromised).

The IRB shall also safeguard the consent process (and, indeed, the entire research relationship) to ensure open and free communication between the principal investigator and research project personnel and the prospective participants. Consent documents must be written in language easily understandable to participants; the possibility of illiteracy should be accounted for, as should the need for communicating in foreign languages. The informed consent documents should be available in English and other languages as appropriate to the research population(s). Foreign language consent

documents should be developed using quality control procedures, such as translation from English to the other language and then back to English, to ensure that the information is correctly conveyed. The role of cultural norms of participants should also be addressed [§ 46:111(b)]. Depending on the purpose of the research, the specific participants, and the nature of the risks(s), the IRB may include in its membership individuals who are knowledgeable about the protocol or have work experiences with the proposed participants (§46.107[f]).

Finally, the principle of ethical responsibility for researchers also requires that the principal investigator and research project personnel think through and establish a plan, in writing, for monitoring the research project to assure that the risk(s) of physical, psychological, social, and economical harm remain minimized, and the benefits for the participants are maximized. The principal investigator must also conduct the research following the approved protocol (or obtain IRB approval for protocol changes), report adverse events and actions taken, conduct research-related activities using ethical principles and sound methodological and clinical practices, and suspend or terminate the research when there is the potential for or serious harm occurred to human participants.

II. Processes and Procedures for Initial and Continuation Approval

II.A. Application for Initial Approval of a Research Project

The principal investigator (applicant) of a research project involving human participants must complete the IRB Application for Initial Review Form (see Appendix C), submit a proposal describing the research project (see paragraph below), and attach required documentation, including the consent form(s) for adults or parents and assent form(s) for children (see Appendix D for templates for sample consent form for adult, assent form for children, and parental/ guardian consent form); copies of the instruments to be used; and NIH human participants training tutorial certificate for himself or herself, co-investigators, and appropriate research project personnel. If the research is sponsored by an agency, organization, or institution, the principal investigator (applicant) must submit a copy of the grant application and approved changes. The research described in the protocol submitted to the IRB and in the grant application must be similar. The IRB initial application form provides the name of the principal investigator and other researcher(s) and status(es), title of the research, funding source, population and research design to be used and related information (e.g., nature of and consideration for a vulnerable population), procedures, and elements of informed consent among other items (e.g., waiver request). This form will also require specific signatures (e.g., principal investigator, major professor/advisor, or professor of record).

The proposal should include a title page, abstract, and sections that state the purpose of and a rationale for the research, the research questions and hypotheses, the methodology to be employed, significance or benefits of the study for participants or others, and the plan for protecting human participants. In the methodology section, the

principal investigator (applicant) shall indicate the population and size (N); sample and size (N), power analysis used to determine sample size, and procedure used to select sample (e.g., simple random selection); research design and analyses (e.g., independent and dependent variables, statistics and assumptions); instruments (describe sections and items; provide validity and reliability data); and general procedures (e.g., participant selection technique, protocols and procedures to be used). The principal investigator (applicant) must also indicate in the proposal: (a) if the population or sample will be identified to the principal investigator or research project personnel by some recognizable descriptor such as name or social security number, and if so, how the privacy and confidentiality of the population or sample will be protected; (b) what impartial provisions will be used in selecting participants from vulnerable and other populations; (c) how consent will be obtained (e.g., basic and additional elements applied) and how the research will be explained to the participants so as to assure that they are “informed” as to the purpose of the research; (d) waiver requests and rationales for such waivers (e.g., basic or additional elements of consent, internal or external use of audio or video tapings); and (e) HIPAA Privacy statement, if applicable. Additionally, the proposal must identify the investigator’s plan for monitoring the research project to assure that risks remain minimal and benefits maximized.

A student whose research project will be used to add to the knowledge base by being published or presented at a conference (e.g., capstone project, clinical paper, thesis, dissertation) is to submit his or her prospectus/proposal. If the research project is a thesis or dissertation, the prospectus/proposal must have been approved by the student’s thesis or dissertation committee prior to submission to the IRB.

II.B. Consent and Assent Forms

Participants in most research projects will sign a consent form for adults (§46.107[f]) and parents/guardians (§46.405107[c])) or assent form for children (§46.405[c]) – also see §46.117; therefore, the application for IRB review should include this document (see Appendix D). The form(s) should provide the general and specific information human participants need to make an "informed decision" to participate in the study. It should include the basic and additional elements of consent listed above, where appropriate. The consent form must be legible, well written, and appropriate for the reading or comprehension level of the participants. If there is reason to believe that the participants are illiterate or do not read English, the consent form must be read to those participants or written in an appropriate foreign language, with that documentation noted on the form.

The assent form for children must be legible, well written, and appropriate for the reading or comprehension level of the participants. If there is reason to believe that child participants are illiterate or English is their second language, the assent form must be read to the children, with that documentation noted on the form.

If the participants are from vulnerable populations (e.g., have sensory or language barriers, economic or educational disadvantages), the principal investigator

(applicant) must describe how the consent form was developed. This description could include readability, translating English to a foreign language and translating the foreign language back to English, the use of an interpreter, or another means of communication to assure that the participants are able to give informed consent. If the participants are children under the age of 18, a parent or guardian must sign the consent form. The principal investigator (applicant) should also have the minors/children sign an assent form.

The requirement of informed written consent may be waived or altered (§46.117) if the research could not practically be carried out without the waiver or alteration or in cases when the principal risk (in using signed consent) is a breach of confidentiality. Again, the principal investigator (applicant) should provide in the proposal/protocol reasons for not addressing the basic or additional consent elements or requesting a waiver of consent and the informed consent action to be taken.

II.C. Review Process for Initial Approval

The principal investigator (applicant) must submit three paper copies and one copy on diskette of the required IRB review documents (e.g., IRB Application for Initial Review Form, proposal/protocol, consent form, assent form, NIH training certificate, grant application) to the Chairperson of the IRB by the first of the month for consideration that month, unless a full review is required. Within a maximum of 15 working days, the Chairperson of the IRB shall make the decision if the research project is exempt (§46.100), eligible for an expedited review (§46.110), or requires a full or convened review of the IRB (§46.108) (see VI. Definitions and Appendix B - exempt and non-exempt research). If needed, the Chairperson of the IRB can consult with individual IRB members, an ad hoc IRB committee, the Human Protection Administrator, or a third party (individuals who are knowledgeable about the protocol or have work experiences with the proposed participants - §46.107[f]) to make a decision at any point during the review process. The IRB can also request that a third party attend meetings during the review process. However, outside persons are not eligible to vote to approve or disapprove a research project (§46.107[f]).

If the Chairperson of the IRB deems the research project to be exempt, the Chairperson shall inform the principal investigator (applicant) of the decision (e.g., approved, approved with revisions, or disapproved and reason) within five (5) working days of the decision. If the Chairperson of the IRB deems the research as warranting an expedited review, the chairperson shall obtain the recommendations of at least one IRB member, an ad hoc IRB committee of two members, or a third party and forward the decision (approved, approved with revisions) to the principal investigator (applicant) within 15 working days. An expedited review cannot be used to disapprove research; this decision shall be made by the full board (§46.109[a]). If the Chairperson of the IRB deems the research as not eligible for exempt or expedited status, the Chairperson shall convene the IRB for a full review, but may assign individual IRB members, an ad hoc IRB committee, or a third party (§46.107[f]) to review the proposed research and provide recommendations to the full board. The scheduled meeting to review the

proposed research must have a quorum, a majority vote is needed to approve or disapprove the research project, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for, against, and abstaining; the basis for requiring changes in or disapproving research; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]). The principal investigator (applicant), research project personnel, and individuals from the research site may be invited to the scheduled meeting to present the research and answer questions.

If the principal investigator (applicant) is also applying for funding to support a research project that uses human participants, they can opt to submit the required IRB forms and documentation and seek pending approval from the Chairperson of the IRB prior to the grant submission or follow the routine protocol as specified by these policies. Pending approval may be granted in cases that the research project is dependent upon the securing of funding. However, the principal investigator (applicant) should keep in mind that requirements for review differ from one funding agency to the next (i.e., some funding agencies require that the IRB process be completed prior to grant submission) and that "pending" does not authorize the principal investigator (applicant) or research project personnel to initiate the research.

A research project will not be approved if: (a) it violates IRB requirements, state statutes, SU-BR and SU Agricultural Center policies, or ethical principles; (b) there is the potential for serious harm to participants (adverse events); (c) it lacks sound methodological or clinical procedures; (d) there are concerns about the qualifications of the principal investigator (applicant) or research project personnel. If it is a student research project, the qualifications of the major/professor or professor of record will be considered; and (e) there are concerns about the credibility or functionality of the research site.

When a research project is approved, the Chairperson of the IRB shall complete and sign the Initial Approval Form for Exempt (or NonExempt) Research and obtain the signatures of the Chairperson of the IROC and Vice-Chancellor for Research, notification of the institution (§46.109[d]). The principal investigator shall be given a copy of the approval form, and thus, notified that the research has been approved (§46.109[d]).

If the research project is not approved, the Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator and the Human Protection Administrator of the decision to disapprove the initial research and the reason for the decision (§46.109[d]). The Human Protection Administrator, within five working days and in writing, shall notify the Chairperson of the IROC and the Vice-Chancellor for Research of the decision and reason for the decision. The principal investigators can appeal the IRB's decision (see II.H. Appeals Process for Disapproved Research) or submit a new research project proposal for initial review.

11.D. Research Project Timeline and Summary/Annual Report for Initial Research

Research projects that receive initial approval by the IRB are approved for specific time intervals not to exceed one year (§46.109[e]). The time interval will depend upon (a) the purpose of the research, (b) the nature of the risk(s), and (c) the vulnerability of the participants. Research with human participants cannot continue beyond the time period approved by the IRB.

If a research project with initial approval is completed one month prior to the anniversary of the approval, the principal investigator shall submit to the Chairperson of the IRB a Summary/Annual Report Form (see Appendix E). If the approved initial research is ongoing one month prior to the anniversary of the approval, the principal investigator must submit to the Chairperson of the IRB at the beginning of that month a Summary/Annual Report Form (see Appendix E), an Application for Continuation Form (see Appendix F), and documentation for any changes to the initially approved research project.

II.E. Review Process for Continuation Approval

If the approved initial or continuation research is ongoing one month prior to the anniversary of the approval, the principal investigator must complete and submit to the Chairperson of the IRB the necessary documentation (e.g., Summary/Annual Report Form, Application for Continuation Form, research project or protocol changes, research sponsor approval for changes) to request a review for continuation. The Chairperson of the IRB shall determine the type of review for continuation approval, expedited or convened (full board), based on (a) the purpose of the research project, (b) the nature of the risk(s) and benefit(s), (c) the vulnerability of human participants, (d) completed research project procedures, and (e) procedures to be conducted. If the Chairperson of the IRB deems the research as warranting an expedited review, the chairperson shall obtain the recommendations of at least one IRB member, an ad hoc IRB committee of two members, or a third party and forward the decision (approved, approved with revisions) to the principal investigator (applicant) within five working days of the decision. An expedited procedure cannot be used to disapprove continuation research; this is the responsibility of the full board (§46.109[a]). If the Chairperson of the IRB deems the research as warranting a convened review, the Chairperson of the IRB may assign individual IRB members, an ad hoc IRB committee, or a third party (§46.107[f]) to review the proposed continuation research and provide recommendations to the full board. The IRB may invite the principal investigator and others involved with the research to attend the meeting to present the research and answer questions, but it is not obligated to extend this invitation (§46.109[d]). However, the IRB may consider new information (not submitted with the application) when reviewing the research. The scheduled meeting to review the research must have a quorum, a majority vote is needed to approve or disapprove continuation, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for, against, and abstaining; the basis for requiring changes in or

disapproving the continuation; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]).

The Chairperson of the IRB shall complete and sign the Approval Form for NonExempt Research (Continuation) and obtain the signatures of the Chairperson of the IROC and Vice-Chancellor for Research, notification of the institution (§46.109[d]). The principal investigator shall be given a copy of the approval form, and thus, notified that the research has been approved for continuation (§46.109[d]). If the research project is not approved for continuation, the Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator and the Human Protection Administrator the decision not to approve continuation and the reason for the decision (§46.109[d]). The Human Protection Administrator, within five working days and in writing, shall notify the Chairperson of the IROC and the Vice-Chancellor for Research of the decision and the reason for the decision. The principal investigator can appeal the IRB's decision (see II.H. Appeals Process for Disapproved Initial and Continuation Research) or submit a new research project proposal for initial approval.

II.F. Research Project Timeline, Summary/Annual Report, and Application for Continuation Research

The IRB shall grant approval for research projects to continue for specific time intervals not to exceed one year (§46.109[e]). The time interval will depend upon (a) the purpose of the research, (b) the nature of the risk(s), (c) and the vulnerability of the participants. Continuation research with human participants cannot continue beyond the time period approved by the IRB.

If the research project approved for continuation is completed one month prior to the anniversary of the continuation approval, the principal investigator shall submit to the Chairperson of the IRB a summary/annual report form (see Appendix E). If the approved continuation research project is ongoing one month prior to the anniversary of the continuation approval, the principal investigator must submit to the Chairperson of the IRB at the beginning of that month a Summary/Annual Report Form (see Appendix E), an Application for Continuation Form (see Appendix F), and other documentation needed to review the research project for continuation (e.g., changes in the research project personnel or protocol).

II.G. IRB Decisions and Actions

The IRB shall review and has the authority to approve, tentatively approve pending receipt of additional information, or disapprove research projects (§46.109[a]) according to the following:

Approved: The protocol is approved as submitted.

Pending: A protocol is considered pending when the problems identified in the protocol are not serious and generally fall into two categories: (a) the principal

investigator (applicant) needs to clarify an aspect of the research or provide additional information or (b) minor changes need to be made to the protocol or in the consent or assent document. In these cases, approval can be given after the principal investigator (applicant) rewrites the protocol and/or informed consent and/or submits to the Chairperson of the IRB a written response to the questions and concerns. The Chairperson can then poll IRB members to receive final approval, as appropriate, or can approve the changes as submitted. The research cannot be initiated before the pending problems are resolved.

Disapproved: The IRB shall disapprove the proposed research if: (a) it violates IRB requirements, state statutes, SU-BR and SU Agricultural Center policies, or ethical principles; (b) there is the potential for serious harm to participants (adverse events); (c) it lacks sound methodological or clinical procedures; (d) there are concerns about the qualifications of the principal investigator (applicant) or research project personnel. If it is a student research project, the qualifications of the major/professor or professor of record will be considered; and (e) there are concerns about the credibility or functionality of the research site. In the event disapproval is foreseen, the IRB may invite the principal investigator and others concerned with the research to attend the meeting to discuss the protocol, research project personnel, and other issues; it is not obligated to extend this invitation (§46.109[d]). The scheduled meeting to review the research must have a quorum, a majority vote is needed to disapprove the research, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for, against, and abstaining; the basis for requiring changes in or disapproving the continuation; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]).

II.H. Appeals Process for Disapproved Research

If the IRB disapproves initial or continuation research and the principal investigator disagrees with the decision, the principal investigator can appeal the decision using the following process:

First, within 30 days of the notification of the IRB decision, the principal investigator (applicant), in writing, may submit an appeal to the Chairperson of the IRB requesting that the IRB reconsider its disapproval decision and approve the research. The written appeal must be based on the following reasons: (a) new information is available that was not available during the decision-making process; (b) there are concerns that policies and procedures were not followed; or (c) the decision to disapprove exceeds the severity of the identified violations of IRB policies or problems found with the research. No other grounds shall be considered. The principal investigator (applicant) is to attach to the written appeal a copy of all documents sent to the IRB (original and modified), documents received for the IRB, and new information to be considered.

The Chairperson of the IRB may appoint individual IRB members, an ad hoc IRB committee, or a third party to review the appeal and make recommendations to the full

board. At the next IRB meeting, the IRB shall consider the appeal and vote to approve the research or to sustain the disapproval. The IRB may request that the principal investigator and others involved with the research attend the meeting, but it is not obligated to do so (§46.109[d]). However, the IRB may review new information submitted after the appeal was received. There must be a quorum at the meeting, a majority vote is needed to approve or disapprove the appeal, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for, against, and abstaining; the basis for approving the research or sustaining the disapproval; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]).

If the appeal is approved, the Chairperson of the IRB shall complete and sign the Approval Form for NonExempt Research (Initial or Continuation) and obtain the signatures of the Chairperson of the IROC and Vice-Chancellor for Research (notification of the institution - §46.109[d]). The principal investigator shall be given a copy of the approval form, and thus, notified that the research has been approved initially or continuation (§46.109[d]). If the appeal is disapproved, the Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator (applicant) and the Human Protection Administrator of the decision not to approve the research and the reason for the decision (§46.109[d]). The Human Protection Administrator, within five working days and in writing, shall notify the Chairperson of the IROC and the Vice-Chancellor for Research of the IRB's decision and the reason for the decision (§46.109[d]).

Second, within 30 days of the notification that the IRB did not approve the appeal, the principal investigator, in writing, may submit an appeal to the Vice-Chancellor for Research requesting that the IRB again reconsider the approval of the research. The written appeal at this level must also be based on the following reasons: (a) new information is available that was not available during the decision-making process; (b) there are concerns that policies and procedures were not followed; or (c) the decision to disapprove exceeds the severity of the identified violations of IRB requirements or problems found with the research. No other grounds shall be considered. The principal investigator (applicant) is to attach to the written appeal a copy of all documents sent to the IRB (original and modified), documents received from the IRB, and new information that the Vice-Chancellor for Research may consider.

The Vice-Chancellor for Research shall render a decision on the appeal within 30 working days or assign the task of reviewing the case to the IROC, the Office of Research and Strategic Initiatives Advisory Committee, or a third party. If the appeal is approved (i.e., the IRB is to again reconsider the approval of the research), the Vice-Chancellor for Research shall communicate this approval of the appeal and the rationale for the approval to the Human Protection Administrator, the Chairperson of the IROC, and the principal investigator (applicant). The Human Protection Administrator shall communicate the Vice-Chancellor for Research's decision to the Chairperson of the IRB. If the Vice-Chancellor for Research denies the appeal, the same lines of communication would be used, and the IRB's decision is final.

Upon receipt of the Vice-Chancellor for Research's approval of the appeal and the rationale for the approval, the IRB shall again follow procedures and use lines of communication similar to those in the first step of the appeals process (see above). This is the last level in the appeals process, and the IRB's decision is final (§46.109[a]).

If it is the decision of the IRB not to approve the research project and the research is sponsored by a federal department or agency, the Human Protection Administrator shall notify the sponsor that the research was not approved by the IRB. If the research project was sponsored by another agency, institution, or organization, it is the principal investigator's responsibility to notify the sponsor that the IRB did not approve the research.

II.I. Changes in Protocols for Approved Research

Changes in nonexempt research (e.g., protocol, methodological or clinical procedures, consent or assent process, research site) require IRB review and approval prior to the initiation of the planned changes (§46.103[b][4][iii]). The only exception is when it is necessary to eliminate apparent immediate hazards to participants and the IRB should be immediately informed of this necessity. A change in instruments or protocols for approved exempt research that has the potential to negatively alter the risk of harm to human participants must be reviewed by the IRB prior to the initiation of the planned change. For example, changes that can potentially result in a risk to the confidentiality and privacy or informed consent of the human participants must be re-submitted to the IRB for review and approval. This approval is required because such changes may cause a research project to no longer be exempt from IRB review.

II.J. Adverse Events during Approved Research

An adverse event is defined as "an undesirable and unintended, although possibly expected, result of therapy or other intervention. A physical, psychological, or social injury to a participant in a research study" (see http://www.tdh.state.tx.us/irb/Define.htm). A definition for adverse event can also be found in IV. Definitions. The principal investigator, within 24 hours and in writing, must notify the Chairperson of the IRB of any event that presents an immediate risk to the health, informed consent, or privacy/confidentiality of the human participants in a research project. The notification must declare the adverse event, the risk, the action taken to address the adverse event, and plans for addressing the risk(s) in the future. If an emergency (i.e., an adverse event occurred that was harmful to the participants), the principal investigator should take immediate action and then inform the Chairperson of the IRB as to the actions taken.

The Chairperson of the IRB shall review the adverse event, action taken, plan to address this adverse event in the future, protocol, consent or assent form, and other research-related documentation (e.g., drug/device brochure), if applicable, and report the event to the full board for recommended action. The principal investigator or others

involved in the research may be invited to attend the meeting to discuss the adverse event, action(s) taken, and plan to ensure that the adverse event does not occur in the future. The IRB action can be as follows: (a) no action needed, (b) revision of protocol or informed consent or assent process, (c) approve plan to address the adverse event and have principal investigator inform currently enrolled participants of changes, and (d) stop a protocol until more information is available. Changes made to the informed consent process or the protocol must be submitted to the IRB for prospective approval.

II.K. HIPAA Privacy Rule for Approved Research

The privacy provisions of the federal law, the Health Insurance Portability and Accountability Act of 1996 (HIPAA), apply to health information created or maintained by health care providers who engage in certain electronic transactions, health plans, and health care clearinghouses (http://www.hhs.gov/ocr/hipaa/bkgrnd.html). The full text of the Privacy rule and DHHS' educational materials on the Rule can be found on the Office for Civil Rights (OCR) HIPAA Privacy Web site (http://www.hhs.gov/ocr/hipaa). DHHS educational materials on the Privacy Rule for the research community can be found on the OCR HIPAA Privacy Web site (http://privacyruleandresearch.nih.gov/).

Organizations, or businesses, called covered entities under the Rule, handle the individually identifiable health information known as protected health information (PHI). The principal investigator should be aware of the Privacy Rule because it establishes the conditions under which covered entities can use or disclose PHI for many purposes, including research. The Privacy Rule specifies that a covered entity may neither use nor disclose PHI for research purposes unless the patient has provided, in advance, his or her written authorization for such use or disclosure. This authorization may be combined with the informed consent document. Six essential elements apply to any authorization: (a) a description of the information to be used (e.g., age, height, blood pressure, IQ score, diagnosis, depression rating, number of treatments, etc); (b) who will use or disclose it; (c) to whom it will be disclosed; (d) the purpose for which it will be disclosed; (e) an expiration date which may indicated as “end of study;” and (f) a patient’s dated signature.

II.L. Ethics/Conflict of Interest for Researchers

A conflict of interest arises when the principal investigator or research project personnel are or may be in a position to put their own interest before the best interests of research participants. The IRB must be informed of potential conflicts of interests. The principal investigator submitting a research project for initial or continuation approval must disclose all interests (e.g., financial, copyright, patent) that may be perceived as a conflict with the best interest of the participants in order for the research to be considered for approval. If the IRB determines that a conflict exists that could influence the research or jeopardize the well-being of the participants, the IRB may require additional information about the conflict or may require that the conflict be resolved before the research is approved. In addition, the IRB may require that additional information be given to the participants “when in the IRB’s judgment the

information would meaningfully add to protection of rights and welfare of participants" (45 CFR 46.109[b]; 21 CFR 56.109[b]).

Concerns have grown that financial conflicts of interest in research, derived from financial relationships and the financial interests they create, may affect the rights and welfare of human participants in research. Financial interests are not prohibited, and not all financial interests cause conflicts of interest or affect the rights and welfare of human participants. DHHS recognizes the complexity of the relationships between government, academia, industry, and others, and recognizes that these relationships often legitimately include financial relationships. However, to the extent financial interests may affect the rights and welfare of human participants in research, the IRB, SU-BR and the SU Agricultural Research Center, and the principal investigator and research project personnel need to consider what actions regarding financial interests may be necessary to protect human participants (DHHS Financial Guidance Document, January, 2001; also see http://www.hhs.gov/ohrp/special/conflict.html).

Furthermore, the IRB is also responsible for ensuring that members who review research have no conflicting interest (§46.107[e]). An IRB member with research under initial or continuing review shall have the same rights and opportunities this policies and procedures manual affords other principal investigators (applicants). However, the IRB member must declare in advance of the review the conflict of interest and not participate in voting on the research project.

II.M. Research Project Verification or Audit

The Chairperson of the IRB, alone or in collaboration with others (e.g., individual IRB members, an ad hoc IRB committee, a third party, the Human Protection Administrator) can determine which approved research projects require verification from sources other than the principal investigator to ensure that no significant changes have occurred since the previous IRB review (§46.103[b][4][ii]). This required verification can also be approved by the IRB during the review of research projects or at subsequent meetings. The verification process could involve conducting audits (or inquiries) to collect information and having individual IRB members, an ad hoc IR committee, or a third party observe the informed consent procedures and conduct of the research.

II.N. Suspension or Termination of Approved and Not Approved Research

Within the Federal Code of Federal Regulations (§ 46.113), the IRB has the authority to suspend or terminate approval of research that is not being conducted in accordance with the IRB's requirements or that has been associated with unexpected serious harm to subjects (adverse events). A research project or research privileges can also be suspended or terminated if there are: (a) violations of regulatory agency regulations (e.g., FDA), state statutes, SU-BR and SU Agricultural Center policies, or ethical principles; (b) deviation in the conflict of interest disclosure or conflict of interest is not reported; (c) the principal investigator or research project personnel are not engaging in sound or empirically based research practices; and (d) there are concerns regarding the credibility or functionality of the research site. Depending on the violation

of IRB requirements (also other regulations, statutes, and principles), adverse events, or problems and concerns, the Chairperson of the IRB, alone or in collaboration with others (e.g., individual IRB members, an ad hoc IRB committee, a third party, the Human Protection Administrator), can suspend a research project at any time during an inquiry or investigation to assure the protection of human participants. The principal investigator can also suspend or terminate a research project or research privileges.

A research project is suspended when a temporary hold is placed on the research. A research project is terminated when IRB approval is withdrawn or stops research that has not been approved. Research projects that are suspended or terminated cannot (a) recruit or enroll new participants, (b) conduct interventions, or (c) engage in data collection or analyses. With a request from the principal investigator and supporting evidence, the IRB may approve for the principal investigator to conduct follow-up activities and analyze data collected, if they are in the best interests of the human participants.

When a complaint is submitted to the IRB or the IRB has information that a research project is not in compliance with IRB policies or other problems or concerns exist (see above), the Chairperson of the IRB shall notify the principal investigator of the allegation, non-compliance, or problem and undertake (or appoint an ad hoc IRB Committee or a third party to undertake) an inquiry or investigation that has as its purpose: (a) dismissal of the complaint; (b) identification of minor or inadvertent non-compliance or problems that are not putting the human participants at risk and make recommendations. For example, the principal investigator would be notified of the violation or problem and directed to submit a report that delineates the minor or inadvertent non-compliance or problem, describes the corrective or other actions to be taken to ensure compliance or eliminate the problem, and state the date the actions will be completed. Also, if it is found that the principal investigator has not obtained IRB approval to conduct the research, the principal investigator and immediate supervisor (e.g., dean, major professor/advisor) would be notified of this violation of IRB policies and directed to terminate the research and complete the IRB procedures to have the research project reviewed; or (c) identify major violations of IRB requirements or other problems and prepare a report that describes the violations, adverse events, or problems and outlines evidence supporting the findings. The report may also recommend that the research project be suspended or terminated. The inquiry or investigation could involve reviewing documents, interviewing individuals knowledgeable about or involved in the research, or conducting an internal audit.

At the next scheduled meeting of the IRB, the investigative report for suspension or termination will be presented, and the findings are to be discussed. The IRB can request that the principal investigator and others involved with the research attend the meeting, but it is not obligated to extend this invitation (§46.109[e]). However, the IRB may review new information submitted after the investigation or the writing of the report. There must be a quorum at the meeting, a majority vote is needed to suspend or terminate the research, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for,

against, and abstaining; the basis for approving the research or sustaining the disapproval; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]).

If it is the decision of the IRB to suspend a research project, the Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator, the principal investigator's supervisor (e.g., dean, major professor/advisor, professor of record), and the Human Protection Administrator of the suspension of the research project and the reason for the decision. If the non-compliance to IRB requirements, adverse events, or other problem(s) resulted in serious risk to the human participants, the Human Protection Administrator, within five working days and in writing, shall notify the Chairperson of the IROC, the Vice-Chancellor for Research, the ORHP, related regulatory agencies, and the sponsor of the research of the suspension. Upon receipt of the notification of suspension, the principal investigator must notify the participants of the suspension and stop all research activities. With the approval of the IRB, the principal investigator can continue follow-up and data analysis activities if they are in the best interests of the participants.

If the violation of IRB requirements or problem is minor or had minimal or no impact on the well-being of the human participants (e.g., violation of the research project's approved timeframe), the same lines of communication described above will be used for notification of the suspension; however, this type of suspension does not have to be reported to the OHRP, other regulatory agencies, and the sponsor of the research when (a) the principal investigator ensures compliance or the problem is eliminated, and (b) the IRB votes to reinstate the research project. Within 10 working days of notification of the suspension, the principal investigator is to take steps to move the research project to compliance (e.g., submit an application for continuation) or eliminate the problem and submit a report to the IRB describing the actions taken and a plan to ensure that the non-compliance or problem does not occur in the future. The IRB at its next meeting shall review the report and vote whether or not to reinstate the research project. There must be a quorum at the meeting, a majority vote is needed to reinstate the research project or sustain the suspension, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for, against, and abstaining; the basis for approving the research or sustaining the disapproval; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]).

If the research project is reinstated, the Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator, the principal investigator's supervisor (e.g., dean, major professor/advisor, professor of record), and the Human Protection Administrator of the reinstatement. The Human Protection Administrator, within five working days and in writing, shall notify the Chairperson of the IROC and the Vice-Chancellor for Research of the reinstatement,

If it is the decision of the IRB to terminate a research project, the Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator, the

principal investigator's supervisor (e.g., dean, major professor/advisor), and the Human Protection Administrator of the decision and the reason for the decision. The Human Protection Administrator, within five working days and in writing, shall notify the Chairperson of the IROC, the Vice-Chancellor for Research, the OHRP, related regulatory agencies, and the sponsor of the research of the termination. Upon receipt of the notification of termination, the principal investigator must notify the participants of the termination and stop all research activities. With the approval of the IRB, the principal investigator can continue follow-up and data analysis activities if they are in the best interests of the participants.

II.O. Appeals Process for Suspended or Terminated Research

If the IRB suspends or terminates a research project and the principal investigator disagrees with the decision, the principal investigator can appeal the decision using the following process:

First, within five days of the notification of the IRB's decision, the principal investigator, in writing, may submit an appeal to the Chairperson of the IRB requesting that the IRB reconsider its decision to suspend or terminate the research and reinstate the research. The written appeal must be based on the following reasons: (a) new information is available that was not available during the decision-making process; (b) there are concerns that policies and procedures were not followed; or (c) the decision to disapprove exceeds the severity of the identified violations, adverse events, or problems found with the research. No other grounds shall be considered. The principal investigator is to attach to the written appeal a copy of all documents sent to the IRB (original and modified), documents received for the IRB, and new information to be considered.

The Chairperson of the IRB may appoint individual IRB members, an ad hoc IRB committee, or a third party to review the appeal and to make a recommendation. At the its next meeting, the IRB shall consider the appeal and vote whether to reinstate the research or sustain the suspension or termination. The IRB may request that the principal investigator and others involved with the research attend the meeting, but it is not obligated to extend this invitation so (§46.113). However, the IRB may review new information submitted after the appeal was received. There must be a quorum at the meeting, a majority vote is needed to reinstate the research project or sustain the suspension or termination, and minutes shall reflect IRB members present; actions taken by the IRB; the vote on these actions, including the number of members voting for, against, and abstaining; the basis for approving the research or sustaining the disapproval; and a written summary of the discussion of controverted issues and their resolution (§46.115[a][1]).

The Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator, the principal investigator's supervisor (e.g., dean, major professor/advisor), and the Human Protection Administrator of the decision of the IRB and the reason for the decision. The Human Protection Administrator, within five

working days and in writing, shall notify the Chairperson of the IROC and the Vice-Chancellor for Research of the IRB's decision and the reason for the decision.

If the research project is reinstated, the IRB may issue a new approval date, approve the research for less than one year (§46.109[e]), require the principal investigator to submit periodic reports, conduct internal audits, or require the principal investigator to re-apply for initial or continuation approval. The IRB may also require that participants previously involved in the research be re-consented and data collected during the research be discarded. The Human Protection Administrator, within five working days and in writing, shall notify the ORHP, related regulatory agencies, and the sponsor of the research of the reinstatement and terms of the reinstatement.

Second, if the IRB does not approve the appeal (i.e., reinstate the suspended or terminated research project), the principal investigator, within five working days of the notification and in writing, may submit an appeal to the Vice-Chancellor for Research requesting that the IRB to again reconsider reinstating the research. The written appeal at this level must also be based on the following reasons: (a) new information is available that was not available during the decision-making process; (b) there are concerns that policies and procedures were not followed; or (c) the decision to suspend or terminate exceeds the severity of the identified violations, adverse events, or problems found with the research. No other grounds shall be considered. The principal investigator is to attach to the written appeal a copy of all documents sent to the IRB (original and modified), documents received from the IRB, and new information that the Vice-Chancellor for Research may consider.

The Vice-Chancellor for Research shall render a decision on the request within 30 working days or assign the task of reviewing the case to the IROC, the Office of Research and Strategic Initiatives Advisory Committee, or a third party. If the request approved (i.e., the IRB is to again reconsider reinstating the research), the Vice-Chancellor for Research shall communicate this approval and the rationale for the approval to the Human Protection Administrator and the Chairperson of the IROC. The Human Protection Administrator shall communicate the decision to the Chairperson of the IRB. If the Vice-Chancellor for Research denies the appeal, the same lines of communication would be used, and the IRB's decision to suspend or terminate the research is final.

Upon receipt of the Vice-Chancellor for Research's approval of the request and the rationale for the approval, the Chairperson of the IRB will follow procedures and use lines of communication similar to those in the first step of the appeals process (see above). This is the last level in the appeals process, and the IRB's decision is final (§46.109[a]).

If the research project is reinstated, the Chairperson of the IRB shall, within five working days and in writing, notify the principal investigator, the principal investigator's supervisor (e.g., dean, major professor/advisor, professor record), and the Human Protection Administrator. The Human Protection Administrator shall, within five working

days and in writing, notify the Chairperson of the IROC, the Vice-Chancellor for Research, the ORHP, related regulatory agencies, and the sponsor of the research of the reinstatement. The IRB may issue a new approval date for the research, approve the research for less than one year(§46.109[e][4]), require the principal investigator to submit periodic reports, conduct internal audits, or require the principal investigator to re-apply for initial or continuation approval. The IRB may also require that participants previously involved in the research be re-consented and data collected during the research be discarded.

If the IRB does not approve the second appeal (i.e., reinstate the suspended or terminated research project), the Chairperson of the IRB, within five working days and in writing, shall notify the principal investigator and the Human Protection Administrator of the decision and the reason for the decision. The Human Protection Administrator, within five working days and in writing, shall notify the Chairperson of the IROC and the Vice-Chancellor for Research. The principal investigator cannot seek another appeal but may submit a new application for review by the IRB

III. Definitions

There are excellent Web sites with definitions of terms and concepts related to federal regulations, research and interventions, and the involvement of human participants in research projects. Sites that researchers should visit prior to completing their IRB documents for initial or continuation approval include, but are not limited to, the following:

Web Site	URL
Department of HHS OHRP IRB Guide Book	http://www.hhs.gov/ohrp/irb/irb_glossary.htm
University of California - Irvine	http://www.rgs.uci.edu/ora/glossary.htm
University of Florida	http://irb.ufl.edu/glossary.htm
University of Alabama - Birmingham	http://main.uab.edu/show.asp?durki=57184
Vanderbilt University	http://www.mc.vanderbilt.edu/irb/Glossary.htm
Texas Department of State Health Services	http://www.tdh.state.tx.us/irb/Define.htm
Fox Chase Cancer Center	http://www.fccc.edu/docs/IRB/glossary.pdf
Texas Tech University Health Sciences Center	http://www.ttuhsc.edu/research/hrpo/irb/glossary.aspx
Northwestern University – HIPAA Glossary	http://www.northwestern.edu/research/OPRS/irb/hipaa/glossary_of_terms.html

The following definitions were obtained or adapted from *The IRB Guidebook*, Code of Federal Regulations Title 45 Part 46 Protection of Human Subjects, and other sources.

Adverse Event:

Unexpected / Unanticipated: Not identified in nature, severity or frequency in the current protocol, informed consent, investigator brochure or with current risk information.

More Prevalent: Adverse events that occur more frequently than anticipated or are more prevalent that expected (i.e. if nausea is noted in consent as occurring in 10% of participants – if 35% of participants experience nausea, then report the event.

All other (expected adverse events): Report as aggregate data at time of continuing review)

Related: There is a reasonable possibility that the adverse event may have been caused by the drug, device or intervention.

Applicant: the sole or primary investigator of a research project that has been submitted for IRB review.

Approval of Research Projects – Criteria (Title 45 Part 46):

§46.111 Criteria for IRB approval of research.

(a) In order to approve research covered by this policy the IRB shall determine that all of the following requirements are satisfied:

(1) Risks to subjects are minimized: (i) by using procedures which are consistent with sound research design and which do not unnecessarily expose subjects to risk, and (ii) whenever appropriate, by using procedures already being performed on the subjects for diagnostic or treatment purposes.

(2) Risks to subjects are reasonable in relation to anticipated benefits, if any, to subjects, and the importance of the knowledge that may reasonably be expected to result. In evaluating risks and benefits, the IRB should consider only those risks and benefits that may result from the research (as distinguished from risks and benefits of therapies subjects would receive even if not participating in the research). The IRB should not consider possible long-range effects of applying knowledge gained in the research (for example, the possible effects of the research on public policy) as among those research risks that fall within the purview of its responsibility.

(3) Selection of subjects is equitable. In making this assessment the IRB should take into account the purposes of the research and the setting in which the research will be conducted and should be particularly cognizant of the special problems of research involving vulnerable populations, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons.

(4) Informed consent will be sought from each prospective subject or the subject's legally authorized representative, in accordance with, and to the extent required by §46.116.

(5) Informed consent will be appropriately documented, in accordance with, and to the extent required by §46.117.

(6) When appropriate, the research plan makes adequate provision for monitoring the data collected to ensure the safety of subjects.

(7) When appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of data.

(b) When some or all of the subjects are likely to be vulnerable to coercion or undue influence, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons, additional safeguards have been included in the study to protect the rights and welfare of these subjects.

Assent: Agreement by an individual not competent to give legally valid informed consent (e.g., a child or cognitively impaired person) to participate in research.

Assurance: A formal written, binding commitment that is submitted to a federal agency in which an institution promises to comply with applicable regulations governing research with human participants and stipulates the procedures through which compliance will be achieved.

Autonomy: Personal capacity to consider alternatives, make choices, and act without undue influence or interference of others.

Belmont Report: A statement of basic ethical principles governing research involving human participants issued by the National Commission for the Protection of Human Subjects in 1978.

Beneficence: An ethical principle discussed in the Belmont Report that entails an obligation to protect persons from harm. The principle of beneficence can be expressed in two general rules: (a) do not harm and (b) protect from harm by maximizing possible benefits and minimizing possible risks of harm.

Benefit: A valued or desired outcome; an advantage. Biologic: Any therapeutic serum, toxin, anti-toxin, or analogous microbial product applicable to the prevention, treatment, or cure of diseases or injuries.

Children: Persons who have not attained the legal age for consent to treatment or procedures involved in the research, as determined under the applicable law of the jurisdiction in which the research will be conducted.

Cognitively Impaired: Having either a psychiatric disorder (e.g., psychosis, neurosis, personality or behavior disorders, or dementia) or a developmental disorder (e.g.,

mental retardation) that affects cognitive or emotional functions to the extent that capacity for judgment and reasoning is significantly diminished. Others, including persons under the influence of or dependent on drugs or alcohol, those suffering from degenerative diseases affecting the brain, terminally ill patients, and persons with severely disabling physical handicaps, may also be compromised in their ability to make decisions in their best interests.

Competence: Technically, a legal term, used to denote capacity to act on one's own behalf; the ability to understand information presented, to appreciate the consequences of acting (or not acting) on that information, and to make a choice. (See also: Incompetence, lncapacity.)

Confidentiality: Pertains to the treatment of information that an individual has disclosed in a relationship of trust and with the expectation that it will not be divulged to others without permission in ways that are inconsistent with the understanding of the original disclosure.
Consent: See: Informed Consent.

Continuing Review: A review of approved research projects, typically prior to the anniversary of the date that the research project was originally approved.

Contract: An agreement; as used here, an agreement that a specific research activity will be performed at the request, and under the direction, of the agency providing the funds. Research performed under contract is more closely controlled by the agency than research performed under a grant. (Compare: Grant.)

Declaration of Helsinki: A code of ethics for clinical research approved by the World Medical Association in 1964 and widely adopted by medical associations in various countries. It was revised in 1975 and 1989.

Dependent Variables: The outcomes that are measured in an experiment. Dependent variables are expected to change as a result of an experimental manipulation of the independent variable(s).

DHHS: A federal agency: U.S. Department of Health and Human Services; formerly the Department of Health, Education and Welfare (DHEW).

Diagnostic (procedure): Tests used to identify a disorder or disease in a living person.

Drug: Any chemical compound that may be used on or administered to humans as an aid in the diagnosis, treatment, cure, mitigation, or prevention of disease or other abnormal conditions.

Emancipated Minor: A legal status conferred upon persons who have not yet attained the age of legal competency as defined by state law (for such purposes as consenting to medical care), but who are entitled to treatment as if they had by virtue of assuming

adult responsibilities such as being self-supporting and not living at home, marriage, or procreation. (See also: Mature Minor.)

Embryo: Early stages of a developing organism, broadly used to refer to stages immediately following fertilization of an egg through implantation and very early pregnancy (i.e., from conception to the eighth week of pregnancy). (See also: Fetus.)

Equitable: Fair or just; used in the context of selection of participants to indicate that the benefits and burdens of research are fairly distributed.

Exempt Research (Title 45 Part 46):

§46.101 To what does this policy apply?

(a) Except as provided in paragraph (b) of this section, this policy applies to all research involving human subjects conducted, supported or otherwise subject to regulation by any Federal Department or Agency which takes appropriate administrative action to make the policy applicable to such research. This includes research conducted by Federal civilian employees or military personnel, except that each Department or Agency head may adopt such procedural modifications as may be appropriate from an administrative standpoint. It also includes research conducted, supported, or otherwise subject to regulation by the Federal Government outside the United States.

(1) Research that is conducted or supported by a Federal Department or Agency, whether or not it is regulated as defined in §46.102(e), must comply with all sections of this policy.

(2) Research that is neither conducted nor supported by a Federal Department or Agency but is subject to regulation as defined in §46.102(e) must be reviewed and approved, in compliance with §46.101, §46.102, and §46.107 through §46.117 of this policy, by an Institutional Review Board (IRB) that operates in accordance with the pertinent requirements of this policy.

(b) Unless otherwise required by Department or Agency heads, research activities in which the only involvement of human subjects will be in one or more of the following categories are exempt from this policy:[1]

(1) Research conducted in established or commonly accepted educational settings, involving normal educational practices, such as (i) research on regular and special education instructional strategies, or (ii) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

(2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless:
(i) information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) any disclosure of

the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.

(3) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior that is not exempt under paragraph (b)(2) of this section, if:
(i) the human subjects are elected or appointed public officials or candidates for public office; or (ii) Federal statute(s) require(s) without exception that the confidentiality of the personally identifiable information will be maintained throughout the research and thereafter.

(4) Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

(5) Research and demonstration projects which are conducted by or subject to the approval of Department or Agency heads, and which are designed to study, evaluate, or otherwise examine:
(i) Public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs.

(6) Taste and food quality evaluation and consumer acceptance studies, (i) if wholesome foods without additives are consumed or (ii) if a food isconsumed that contains a food ingredient at or below the level and for a use found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.

(c) Department or Agency heads retain final judgment as to whether a particular activity is covered by this policy.

(d) Department or Agency heads may require that specific research activities or classes of research activities conducted, supported, or otherwise subject to regulation by the Department or Agency but not otherwise covered by this policy, comply with some or all of the requirements of this policy.

(e) Compliance with this policy requires compliance with pertinent Federal laws or regulations which provide additional protections for human subjects.

(f) This policy does not affect any State or local laws or regulations which may otherwise be applicable and which provide additional protections for human subjects.

(g) This policy does not affect any foreign laws or regulations which may otherwise be applicable and which provide additional protections to human subjects of research.

(h) When research covered by this policy takes place in foreign countries, procedures normally followed in the foreign countries to protect human subjects may differ from those set forth in this policy. [An example is a foreign institution which complies with guidelines consistent with the World Medical Assembly Declaration (Declaration of Helsinki amended 1989) issued either by sovereign states or by an organization whose function for the protection of human research subjects is internationally recognized.] In these circumstances, if a Department or Agency head determines that the procedures prescribed by the institution afford protections that are at least equivalent to those provided in this policy, the Department or Agency head may approve the substitution of the foreign procedures in lieu of the procedural requirements provided in this policy. Except when otherwise required by statute, Executive Order, or the Department or Agency head, notices of these actions as they occur will be published in the **Federal Register** or will be otherwise published as provided in Department or Agency procedures.

(i) Unless otherwise required by law, Department or Agency heads may waive the applicability of some or all of the provisions of this policy to specific research activities or classes or research activities otherwise covered by this policy. Except when otherwise required by statute or Executive Order, the Department or Agencyhead shall forward advance notices of these actions to the Office for Protection from Research Risks, National Institutes of Health, Department of Health and Human Services (DHHS), and shall also publish them in the **Federal Register** or in such other manner as provided in Department or Agency procedures.[1]

[1] Institutions with DHHS-approved assurances on file will abide by provisions of Title 45 CFR Part 46 Subparts A-D. Some of the other departments and agencies have incorporated all provisions of Title 45 CFR Part 46 into their policies and procedures as well. However, the exemptions at 45 CFR 46.101(b) do not apply to research involving prisoners, fetuses, pregnant women, or human in vitro fertilization, Subparts B and C. The exemption at 45 CFR 46.101(b)(2), for research involving survey or interview procedures or observation of public behavior, does not apply to research with children, Subpart D, except for research involving observations of public behavior when the investigator(s) do not participate in the activities being observed.

Expedited Review (Title 45 Part 46):

§46.110 Expedited review procedures for certain kinds of research involving no more than minimal risk, and for minor changes in approved research.

(a) The Secretary, HHS, has established, and published as a Notice in the *Federal Register*, a list of categories of research that may be reviewed by the IRB through an expedited review procedure. The list will be amended, as appropriate, after consultation with other departments and agencies, through periodic republication by the Secretary, HHS, in the Federal Register. A copy of the list is available from the Office for Protection from Research Risks, National Institutes of Health, DHHS, Bethesda, Maryland 20892.

(b) An IRB may use the expedited review procedure to review either or both of the following:

(1) some or all of the research appearing on the list and found by the reviewer(s) to involve no more than minimal risk,

(2) minor changes in previously approved research during the period (of one year or less) for which approval is authorized.

Under an expedited review procedure, the review may be carried out by the IRB chairperson or by one or more experienced reviewers designated by the chairperson from among members of the IRB. In reviewing the research, the reviewers may exercise all of the authorities of the IRB except that the reviewers may not disapprove the research. A research activity may be disapproved only after review in accordance with the non-expedited procedure set forth in §46.108(b).

(c) Each IRB which uses an expedited review procedure shall adopt a method for keeping all members advised of research proposals which have been approved under the procedure.

(d) The Department or Agency head may restrict, suspend, terminate, or choose not to authorize an institution's or IRB's use of the expedited review procedure.

Expedited Review – Research Categories:

Categories of Research That May Be Reviewed by the Institutional Review Board (IRB) through an Expedited Review Procedure[1]

(A) Research activities that (1) present no more than minimal risk to human participants, and (2) involve only procedures listed in one or more of the following categories, may be reviewed by the IRB through the expedited review procedure authorized by 45 CFR 46.110 and 21 CFR 56.110. The activities listed should not be deemed to be of minimal risk simply because they are included on this list. Inclusion on this list merely means that the activity is eligible for review through the expedited review procedure when the specific circumstances of the proposed research involve no more than minimal risk to human participants.

(B) The categories in this list apply regardless of the age of participants, except as noted.

(C) The expedited review procedure may not be used where identification of the participants and/or their responses would reasonably place them at risk of criminal or civil liability or be damaging to the participants' financial standing, employability, insurability, reputation, or be stigmatizing, unless reasonable and appropriate protections will be implemented so that risks related to invasion of privacy and breach of confidentiality are no greater than minimal.

(D) The expedited review procedure may not be used for classified research involving human participants.

(E) IRBs are reminded that the standard requirements for informed consent (or its waiver, alteration, or exception) apply regardless of the type of review--expedited or convened--utilized by the IRB.

(F) Categories one (1) through seven (7) pertain to both initial and continuing IRB review.

(1) Clinical studies of drugs and medical devices only when condition (a) or (b) is met.

(a) Research on drugs for which an investigational new drug application (21 CFR Part 312) is not required. (Note: Research on marketed drugs that significantly increases the risks or decreases the acceptability of the risks associated with the use of the product is not eligible for expedited review.)

(b) Research on medical devices for which (i) an investigational device exemption application (21 CFR Part 812) is not required; or (ii) the medical device is cleared/approved for marketing and the medical device is being used in accordance with its cleared/approved labeling.

(2) Collection of blood samples by finger stick, heel stick, ear stick, or venipuncture as follows:

(a) from healthy, nonpregnant adults who weigh at least 110 pounds. For these participants, the amounts drawn may not exceed 550 ml in an 8 week period and collection may not occur more frequently than 2 times per week; or

(b) from other adults and children[2], considering the age, weight, and health of the participants, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these participants, the amount drawn may not exceed the lesser of 50 ml or 3 ml per kg in an 8 week period and collection may not occur more frequently than 2 times per week.

(3) Prospective collection of biological specimens for research purposes by noninvasive means.

Examples: (a) hair and nail clippings in a nondisfiguring manner; (b) deciduous teeth at time of exfoliation or if routine patient care indicates a need for extraction; (c) permanent teeth if routine patient care indicates a need for extraction; (d) excreta and external secretions (including sweat); (e) uncannulated saliva collected either in an unstimulated fashion or stimulated by chewing gumbase or wax or by applying a dilute citric solution to the tongue; (f) placenta removed at delivery; (g) amniotic fluid obtained at the time of rupture of the membrane prior to or during labor; (h) supra- and subgingival dental plaque and calculus, provided the collection procedure is not more invasive than routine prophylactic scaling of the teeth and the process is accomplished in accordance with accepted prophylactic techniques; (i) mucosal and skin cells collected by buccal scraping or swab, skin swab, or mouth washings; (j) sputum collected after saline mist nebulization.

(4) Collection of data through noninvasive procedures (not involving general anesthesia or sedation) routinely employed in clinical practice, excluding procedures involving x-rays or microwaves. Where medical devices are employed, they must be cleared/approved for marketing. (Studies intended to evaluate the safety and effectiveness of the medical device are not generally eligible for expedited review, including studies of cleared medical devices for new indications.)

Examples: (a) physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the subject or an invasion of the subject's privacy; (b) weighing or testing sensory acuity; (c) magnetic resonance imaging; (d) electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, ultrasound, diagnostic infrared imaging, doppler blood flow, and echocardiography; (e) moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.

(5) Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for nonresearch purposes (such as medical treatment or diagnosis). (NOTE: Some research in this category may be exempt from the HHS regulations for the protection of human participants. 45 CFR 46.101(b)(4). This listing refers only to research that is not exempt.)

(6) Collection of data from voice, video, digital, or image recordings made for research purposes.

(7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies. (NOTE: Some research in this category may be exempt from the HHS regulations for the protection of human participants. 45 CFR 46.101(b)(2) and (b)(3). This listing refers only to research that is not exempt.)

(8) Continuing review of research previously approved by the convened IRB as follows:

(a) where (i) the research is permanently closed to the enrollment of new participants; (ii) all participants have completed all research-related interventions; and (iii) the research remains active only for long-term follow-up of participants; or

(b) where no participants have been enrolled and no additional risks have been identified; or

(c) where the remaining research activities are limited to data analysis.

(9) Continuing review of research, not conducted under an investigational new drug application or investigational device exemption where categories two (2) through eight

(8) do not apply but the IRB has determined and documented at a convened meeting that the research involves no greater than minimal risk and no additional risks have been identified.

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[1] An expedited review procedure consists of a review of research involving human participants by the IRB chairperson or by one or more experienced reviewers designated by the chairperson from among members of the IRB in accordance with the requirements set forth in 45 CFR 46.110.

[2] Children are defined in the HHS regulations as "persons who have not attained the legal age for consent to treatments or procedures involved in the research, under the applicable law of the jurisdiction in which the research will be conducted." 45 CFR 46.402(a).

Source: 63 FR 60364-60367, November 9, 1998.

Experimental: Term often used to denote a therapy (drug, device, procedure) that is unproven or not yet scientifically validated with respect to safety and efficacy. A procedure may be considered “experimental” without necessarily being part of a formal study (research) to evaluate its usefulness. (See also: Research.)

FDA: Food and Drug Administration; an agency of the federal government established by Congress in 1912 and presently part of the Department of Health and Human Services.

Federal Policy (The): The federal policy that provides regulations for the involvement of human participants in research. The Policy applies to all research involving human participants conducted, supported, or otherwise subject to regulation by any federal department or agency that takes appropriate administrative action to make the Policy applicable to such research. Currently, sixteen federal agencies have adopted the Federal Policy. (Also known as the “Common Rule.”)

Fetal Material: The placenta, amniotic fluid, fetal membranes, and umbilical cord.

Fetus: The product of conception from the time of implantation until delivery. If the delivered or expelled fetus is viable, it is designated an infant. The term “fetus” generally refers to later phases of development; the term “embryo” is usually used for earlier phases of development. (See also: Embryo.)

510(K) Device: A medical device that is considered substantially equivalent to a device that was or is being legally marketed. A sponsor planning to market such a device must submit notification to the FDA 90 days in advance of placing the device on the market. If the FDA concurs with the sponsor, the device may then be marketed. 510(k) is the section of the Food, Drug and Cosmetic Act that describes premarket notification; hence the designation “510(k) device.”

Full Board/Committee Review: Review of proposed research at a convened meeting at which a majority of the membership of the IRB is present, including at least one member whose primary concerns are in nonscientific areas. For the research to be approved, it must receive the approval of a majority of those members present at the meeting.

Gene Therapy: The treatment of genetic disease accomplished by altering the genetic structure of either somatic (nonreproductive) or germline (reproductive) cells.

Grant: Financial support provided for research study designed and proposed by the principal investigator(s). The granting agency exercises no direct control over the conduct of approved research supported by a grant. (Compare: Contract.)

Guardian: An individual who is authorized under applicable state or local law to give permission on behalf of a child to general medical care.

Human Subject/Participant: an Individual whose physiological or behavioral characteristics and responses are the object of study in a research project (see definition below). Under the federal regulations, human participants are defined as: living individual(s) about whom an investigator conducting research obtains: (a) data through intervention or interaction with the individual or (b) identifiable private information.

IDE: See: Investigational Device Exemptions.

Incapacity: Refers to a person's mental status and means inability to understand information presented, to appreciate the consequences of acting (or not acting) on that information, and to make a choice. Often used as a synonym for incompetence. (See also: Incompetence.)

Incompetence: Technically, a legal term meaning inability to manage one's own affairs. Often used as a synonym for incapacity. (See also: Incapacity.)

IND: See: Investigational New Drug.

Informed Consent: A person's voluntary agreement, based upon adequate knowledge and understanding of relevant information, to participate in research or to undergo a diagnostic, therapeutic, or preventive procedure. In giving informed consent, participants may not waive or appear to waive any of their legal rights, or release or appear to release the investigator, the sponsor, the institution or agents thereof from liability for negligence.

Initiated: Initiated means the point that human participants have begun participating in the research.

Institution (1): Any public or private entity or agency (including federal, state, and local agencies).

Institution (2): A residential facility that provides food, shelter, and professional services (including treatment, skilled nursing, intermediate or long-term care, and custodial or residential care). Examples include general, mental, or chronic disease hospitals; inpatient community mental health centers; halfway houses and nursing homes; alcohol and drug addiction treatment centers; homes for the aged or dependent, residential schools for the mentally or physically handicapped; and homes for dependent and neglected children.

Institutional Review Board: A specially constituted review body established or designated by an entity to protect the welfare of human participants recruited to participate in biomedical or behavioral research.

Institutionalized: Confined, either voluntarily or involuntarily (e.g., a hospital, prison or nursing home).

Institutionalized Cognitively Impaired: Persons who are confined, either voluntarily or involuntarily, in a facility for the care of the mentally or otherwise disabled (e.g., a psychiatric hospital, home, or school for the retarded).

Investigational Device Exemptions (IDE): Exemptions from certain regulations found in the Medical Device Amendments that allow shipment of unapproved devices for use in clinical investigations.

Investigational New Drug or Device: A drug or device permitted by FDA to be tested in humans but not yet determined to be safe and effective for a particular use in the general population and not yet licensed for marketing.

Investigator: An individual who actually conducts an investigation. Any interventions (e.g., drugs) involved in the study are administered to participants under the immediate direction of the investigator. (See also: Lead Researcher and Principal Investigator.}

In vitro: Literally, “in glass” or “test tube;” used to refer to processes that are carried out outside the living body, usually in the laboratory, as distinguished from in vivo.

In Vivo: Literally, “in the living body;” processes, such as the absorption of a drug by the human body, carried out in the living body rather than in a laboratory (in vitro).

IRB: See: Institutional Review Board.

Justice: An ethical principle discussed in the Belmont Report requiring fairness in distribution of burdens and benefits; often expressed in terms of treating persons of similar circumstances or characteristics similarly.

Key Personnel: Investigators in a research project who expect to be a co-author of a publication stemming from the research project and/or are listed as the investigators in a grant application.

Lead Researcher: The person with primary responsibility for meeting all ethical, scientific, and regulatory requirements for conduct of a study protocol, whether or not acting as the Principal Investigator for the award that funds said study.

Legally Authorized Representative: A person authorized either by statute or by court appointment to make decisions on behalf of another person. In human participants research, an individual or judicial or other body authorized under applicable law to consent on behalf of a prospective subject to the subject's participation in the procedure(s) involved in the research.

Mature Minor: Someone who has not reached adulthood (as deemed by state law) but who may be treated as an adult for certain purposes (e.g., consenting to medical care). Note that a mature minor is not necessarily an emancipated minor. (See also: Emancipated Minor.)

Medical Device: A diagnostic or therapeutic article that does not achieve any of its principal intended purpose through chemical action within or on the body. Such devices include diagnostic test kits, crutches, electrodes, pacemakers, arterial grafts, intraocular lenses, and orthopedic pins or other orthopedic equipment.

Medical Device Amendments (MDA): Amendments to the Federal Food, Drug and Cosmetic Act passed in 1976 to regulate the distribution of medical devices and diagnostic products.

Mentally Disabled: See: Cognitively Impaired.

Minimal Risk: Means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests. Harm can include:

- Physical (e.g., greater than the minor discomfort or physical harm associated with common medical procedures)
- Psychological (thinking about or talking about one's own behavior or attitudes on sensitive topics. Note: the probability of psychological risks can be minimized by informed consent and a statement in the consent document that the participant need not respond to all questions).
- Social (may occur if the confidentiality safeguards associated with the research are not sufficient).
- Economic (may occur if participation in research results in costs, such as the costs associated with injuries).

Monitoring: The collection and analysis of data as the project progresses to assure the appropriateness of the research, its design and subject protections.

NDA : See: New Drug Application.

New Drug Application: Request for FDA approval to market a new drug. NIH: National Institutes of Health: a federal agency within the Public Health Service, DHHS, comprising 21 institutes and centers. It is responsible for carrying out and supporting biomedical and behavioral research.

Nonsignificant Risk Device: An investigational medical device that does not present significant risk to the patient. (See also Significant Risk Device.)

Nuremberg Code: A code of research ethics developed during the trials of Nazi war criminals following World War II and widely adopted as a standard during the 1950s and 1960s for protecting human participants.

Office of Human Research Protections (OHRP): The office within the National Institutes of Health, an agency of the Public Health Service, Department of Health and Human Services, responsible for implementing DHHS regulations (45 CFR Part 46) governing research involving human participants.

Permission: The agreement of parent(s) or guardian to the participation of their child or ward in research.

Pharmacology: The scientific discipline that studies the action of drugs on living systems (animals or human beings).

Phase 1, 2, 3, 4 Drug Trials: Different stages of testing drugs in humans, from first application in humans (Phase 1) through limited and broad clinical tests (Phase 3), to postmarketing studies (Phase 4). Phase 1 Drug Trial: Phase 1 trials include the initial introduction of an investigational new drug into humans. These studies are typically conducted with healthy volunteers; sometimes, where the drug is intended for use in patients with a particular disease, however, such patients may participate as participants. Phase 1 trials are designed to determine the metabolic and pharmacological actions of the drug in humans, the side effects associated with increasing doses (to establish a safe dose range), and, if possible, to gain early evidence of effectiveness; they are typically closely monitored. The ultimate goal of Phase 1 trials is to obtain sufficient information about the drug's pharmacokinetics and pharmacological effects to permit the design of well-controlled, sufficiently valid Phase 2 studies.

Pregnancy: The period of time from confirmation of implantation of a fertilized egg within the uterus until the fetus has entirely left the uterus (i. e., has been delivered). Implantation is confirmed through a presumptive sign of pregnancy such as missed menses or a positive pregnancy test. This "confirmation" may be in error, but, for

research purposes, investigators would presume that a living fetus was present until evidence to the contrary was clear. Although fertilization occurs a week or more before implantation, the current inability to detect the fertilization event or the presence of a newly fertilized egg makes a definition of pregnancy based on implantation necessary.

Premarket Approval: Process of scientific and regulatory review by the FDA to ensure the safety and effectiveness of Class III devices.

Principal Investigator: The scientist or scholar with primary responsibility for the scientific, technical and administrative conduct of a funded research project. (See also: Investigator and Lead Researcher.)

Prisoner: An individual involuntarily confined in a penal institution, including persons: (l) sentenced under a criminal or civil statute; (2) detained pending arraignment, trial, or sentencing; and (3) detained in other facilities (e.g., for drug detoxification or treatment of alcoholism) under statutes or commitment procedures providing such alternatives to criminal prosecution or incarceration in a penal institution.

Privacy : Control over the extent, timing, and circumstances of sharing oneself (physically, behaviorally, or intellectually) with others.

Protocol: The formal design or plan of an experiment or research activity; specifically, the plan submitted to an IRB for review and to an agency for research support. The protocol includes a description of the research design or methodology to be employed, the eligibility requirements for prospective participants and controls, the treatment regimen(s), and the proposed methods of analysis that will be performed on the collected data.

Radioactive Drug: Any substance defined as a drug by the Federal Food, Drug and Cosmetic Act that exhibits spontaneous disintegration of unstable nuclei with the emission of nuclear particles or photons. Included are any nonradioactive reagent kit or nuclide generator that is intended to be used in the preparation of a radioactive drug and “radioactive biological products,” as defined in 21 CFR 600.3(ee). Drugs such as carbon-containing compounds or potassium-containing salts containing trace quantities of naturally occurring radionuclides are not considered radioactive drugs.

Radiopaque Contrast Agents: Materials that stop or attenuate radiation that is passed through the body, creating an outline on film of the organ(s) being examined. Contrast agents, sometimes called “dyes,” do not contain radioisotopes. When such agents are used, exposure to radiation results only from the X-ray equipment used in the examination. The chemical structure of radiopaque contrast agents can produce a variety of adverse reactions, some of which may be severe, and possibly life-threatening, in certain individuals.

Radiopharmaceuticals: Drugs (compounds or materials) that may be labeled or tagged with a radioisotope. These materials are largely physiological or

subpharmacological in action, and, in many cases, function much like materials found in the body. The principal risk associated with these materials is the consequent radiation exposure to the body or to specific organ systems when they are injected into the body.

Random, Random Assignment, Randomization, Randomized: Assignment of participants to different treatments, interventions, or conditions according to chance rather than systematically (e.g., as dictated by the standard or usual response to their condition, history, or prognosis, or according to demographic characteristics). Random assignment of participants to conditions is an essential element of experimental research because it makes more likely the probability that differences observed between subject groups are the result of the experimental intervention.

Recombinant DNA Technology: "The ability to chop up DNA, the stuff of which genes are made, and move the pieces, [which] permits the direct examination of the human genome," and the identification of the genetic components of a wide variety of disorders [Holtzman (1989), p. l]. Recombinant DNA technology is also used to develop diagnostic screens and tests, as well as drugs and biologics for treating diseases with genetic components.

Research: A systematic investigation (i.e., the gathering and analysis of information) designed to develop or contribute to generalizable knowledge.

Research Project: Research, by definition, is a systematic investigation designed to develop or contribute to generalizable knowledge. For the purpose of these policies, a research project is defined as: a systematic investigation (i.e., the gathering and analysis of information), including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. For the purpose of these policies, if an investigator considers publishing the study in a scholarly/scientific journal or presenting the results at a national conference---the research, by definition, is a research project.

- Research projects using human participants encompasses (and therefore be subject to review) any systematic investigation of non-public data, records, or specimens involving human participants or data collected through intervention/interaction with the participant.
  - An Intervention: both physical procedures by which data are gathered and manipulations of the subject or the subject's environment that are performed for research purposes.
  - An Interaction: includes communication or interpersonal contact between investigator and subject.
  - Private Information: information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public. Private information must be individually identifiable (i.e., the identity of the subject is or may be readily ascertained by the investigator or

associated with the information) in order for obtaining the information to constitute research involving human participants.

Respect for Persons: An ethical principle discussed in the Belmont Report requiring that individual autonomy be respected and that persons with diminished autonomy be protected.

Review (of research): The concurrent oversight of research on a periodic basis by an IRB. In addition to the at least annual reviews mandated by the federal regulations, reviews may, if deemed appropriate, also be conducted on a continuous or periodic basis.

Risk: The probability of harm or injury (physical, psychological, social, or economic) occurring as a result of participation in a research study. (See also: Minimal Risk.)

Significant Risk Device: An investigational medical device that presents a potential for serious risk to the health, safety, or welfare of the subject.

Site Visit: A visit by agency officials, representatives, or consultants to the location of a research activity to assess the adequacy of IRB protection of human participants or the capability of personnel to conduct the research.

Sponsor (of a drug trial): A person or entity that initiates a clinical investigation of a drug, usually the drug manufacturer or research institution that developed the drug. The sponsor does not actually conduct the investigation, but rather distributes the new drug to investigators and physicians for clinical trials. The drug is administered to participants under the immediate direction of an investigator who is not also a sponsor. A clinical investigator may, however, serve as a sponsor-investigator. The sponsor assumes responsibility for investigating the new drug, including responsibility for compliance with applicable laws and regulations. The sponsor, for example, is responsible for obtaining FDA approval to conduct a trial and for reporting the results of the trial to the FDA.

Sponsor Investigator: An individual who both initiates and actually conducts, alone or with others, a clinical investigation. Corporations, agencies, or other institutions do not qualify as sponsor-investigators.

Subjects/Participants (Human): See: Human Subject/Participants.

Therapeutic Intent: The research physician's intent to provide some benefit to improving a subject's condition (e.g., prolongation of life, shrinkage of tumor, or improved quality of life, even though cure or dramatic improvement cannot necessarily be effected.) This term is sometimes associated with Phase 1 drug studies in which potentially toxic drugs are given to an individual with the hope of inducing some improvement in the patient's condition as well as assessing the safety and pharmacology of a drug.

Therapy: Treatment intended and expected to alleviate a disease or disorder.

Variable (noun): An element or factor that the research is designed to study, either as an experimental intervention or a possible outcome (or factor affecting the outcome) of that intervention.

Voluntary: Free of coercion, duress, or undue inducement. Used in the research context to refer to a subject's decision to participate (or to continue to participate) in a research activity.

Waiver of the Requirement for Signed Consent: A request by an applicant for a waiver of the requirement for signed consent when the principal risk is a breach of confidentiality.

IV. Federal Regulations, Application Forms, and Other Documents

Appendixes A, B, C, D, E, and F that follow have been cited in the above IRB policies and procedures. These appendixes contain the Belmont Report; Code of Regulations Title 45 Human Welfare Part 46 Protection of Human Subjects; Application for Initial Review Form; informed consent checklist, templates for informed consent, and template for child assent; Summary/Annual Report Form; and Application for Continuation Review Form. The Web links for the Belmont Report and 45 CFR 46 have been listed in this manual and hardcopy or digital copies of IRB documents can be obtained by contacting the Chairperson of the IRB.

Appendix A

The Belmont Report

Web Site: http://ohsr.od.nih.gov/guidelines/belmont.html

The Belmont Report

Office of the Secretary

Ethical Principles and Guidelines for the Protection of Human Subjects of Research

The National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research

April 18, 1979

AGENCY: Department of Health, Education, and Welfare.

ACTION: Notice of Report for Public Comment.

SUMMARY: On July 12, 1974, the National Research Act (Pub. L. 93-348) was signed into law, there-by creating the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research. One of the charges to the Commission was to identify the basic ethical principles that should underlie the conduct of biomedical and behavioral research involving human subjects and to develop guidelines which should be followed to assure that such research is conducted in accordance with those principles. In carrying out the above, the Commission was directed to consider: **(i)** the boundaries between biomedical and behavioral research and the accepted and routine practice of medicine, **(ii)** the role of assessment of risk-benefit criteria in the determination of the appropriateness of research involving human subjects, **(iii)** appropriate guidelines for the selection of human subjects for participation in such research and **(iv)** the nature and definition of informed consent in various research settings.

The Belmont Report attempts to summarize the basic ethical principles identified by the Commission in the course of its deliberations. It is the outgrowth of an intensive four-day period of discussions that were held in February 1976 at the Smithsonian Institution's Belmont Conference Center supplemented by the monthly deliberations of the Commission that were held over a period of nearly four years. It is a statement of basic ethical principles and guidelines that should assist in resolving the ethical problems that surround the conduct of research with human subjects. By publishing the Report in the Federal Register, and providing reprints upon request, the Secretary intends that it may be made readily available to scientists, members of Institutional Review Boards, and Federal employees. The two-volume Appendix, containing the lengthy reports of experts and specialists who assisted the Commission in fulfilling this part of its charge, is available as DHEW Publication No. (OS) 78-0013 and No. (OS) 78-0014, for sale by the

Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

Unlike most other reports of the Commission, the Belmont Report does not make specific recommendations for administrative action by the Secretary of Health, Education, and Welfare. Rather, the Commission recommended that the Belmont Report be adopted in its entirety, as a statement of the Department's policy. The Department requests public comment on this recommendation.

National Commission for the Protection of Human Subjects

of Biomedical and Behavioral Research

Members of the Commission

Kenneth John Ryan, M.D., Chairman, Chief of Staff, Boston Hospital for Women.
Joseph V. Brady, Ph.D., Professor of Behavioral Biology, Johns Hopkins University.
Robert E. Cooke, M.D., President, Medical College of Pennsylvania.
Dorothy I. Height, President, National Council of Negro Women, Inc.
Albert R. Jonsen, Ph.D., Associate Professor of Bioethics, University of California at San Francisco.
Patricia King, J.D., Associate Professor of Law, Georgetown University Law Center.
Karen Lebacqz, Ph.D., Associate Professor of Christian Ethics, Pacific School of Religion.
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****Eliot Stellar, Ph.D., Provost of the University and Professor of Physiological Psychology, University of Pennsylvania.*
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*** *Deceased.*

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3. Selection of Subjects

Ethical Principles & Guidelines for Research Involving Human Subjects

Scientific research has produced substantial social benefits. It has also posed some troubling ethical questions. Public attention was drawn to these questions by reported abuses of human subjects in biomedical experiments, especially during the Second World War. During the Nuremberg War Crime Trials, the Nuremberg code was drafted as a set of standards for judging physicians and scientists who had conducted biomedical experiments on concentration camp prisoners. This code became the prototype of many later codes(1) intended to assure that research involving human subjects would be carried out in an ethical manner.

The codes consist of rules, some general, others specific, that guide the investigators or the reviewers of research in their work. Such rules often are inadequate to cover complex situations; at times they come into conflict, and they are frequently difficult to interpret or apply. Broader ethical principles will provide a basis on which specific rules may be formulated, criticized and interpreted.

Three principles, or general prescriptive judgments, that are relevant to research involving human subjects are identified in this statement. Other principles may also be relevant. These three are comprehensive, however, and are stated at a level of generalization that should assist scientists, subjects, reviewers and interested citizens to understand the ethical issues inherent in research involving human subjects. These principles cannot always be applied so as to resolve beyond dispute particular ethical problems. The objective is to provide an analytical framework that will guide the resolution of ethical problems arising from research involving human subjects.

This statement consists of a distinction between research and practice, a discussion of the three basic ethical principles, and remarks about the application of these principles.

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Part A: Boundaries Between Practice & Research

A. Boundaries Between Practice and Research

It is important to distinguish between biomedical and behavioral research, on the one hand, and the practice of accepted therapy on the other, in order to know what activities ought to undergo review for the protection of human subjects of research. The distinction between research and practice is blurred partly because both often occur together (as in research designed to evaluate a therapy) and partly because notable departures from standard practice are often called "experimental" when the terms "experimental" and "research" are not carefully defined.

For the most part, the term "practice" refers to interventions that are designed solely to enhance the well-being of an individual patient or client and that have a reasonable expectation of success. The purpose of medical or behavioral practice is to provide

diagnosis, preventive treatment or therapy to particular individuals.(2) By contrast, the term "research' designates an activity designed to test an hypothesis, permit conclusions to be drawn, and thereby to develop or contribute to generalizable knowledge (expressed, for example, in theories, principles, and statements of relationships). Research is usually described in a formal protocol that sets forth an objective and a set of procedures designed to reach that objective.

When a clinician departs in a significant way from standard or accepted practice, the innovation does not, in and of itself, constitute research. The fact that a procedure is "experimental," in the sense of new, untested or different, does not automatically place it in the category of research. Radically new procedures of this description should, however, be made the object of formal research at an early stage in order to determine whether they are safe and effective. Thus, it is the responsibility of medical practice committees, for example, to insist that a major innovation be incorporated into a formal research project.(3)

Research and practice may be carried on together when research is designed to evaluate the safety and efficacy of a therapy. This need not cause any confusion regarding whether or not the activity requires review; the general rule is that if there is any element of research in an activity, that activity should undergo review for the protection of human subjects.

Part B: Basic Ethical Principles

B. Basic Ethical Principles

The expression "basic ethical principles" refers to those general judgments that serve as a basic justification for the many particular ethical prescriptions and evaluations of human actions. Three basic principles, among those generally accepted in our cultural tradition, are particularly relevant to the ethics of research involving human subjects: the principles of respect of persons, beneficence and justice.

1. Respect for Persons. -- Respect for persons incorporates at least two ethical convictions: first, that individuals should be treated as autonomous agents, and second, that persons with diminished autonomy are entitled to protection. The principle of respect for persons thus divides into two separate moral requirements: the requirement to acknowledge autonomy and the requirement to protect those with diminished autonomy.

An autonomous person is an individual capable of deliberation about personal goals and of acting under the direction of such deliberation. To respect autonomy is to give weight to autonomous persons' considered opinions and choices while refraining from obstructing their actions unless they are clearly detrimental to others. To show lack of respect for an autonomous agent is to repudiate that person's considered judgments, to deny an individual the freedom to act on those considered judgments, or to withhold information necessary to make a considered judgment, when there are no compelling reasons to do so.

However, not every human being is capable of self-determination. The capacity for self-determination matures during an individual's life, and some individuals lose this capacity wholly or in part because of illness, mental disability, or circumstances that severely restrict liberty. Respect for the immature and the incapacitated may require protecting them as they mature or while they are incapacitated.

Some persons are in need of extensive protection, even to the point of excluding them from activities which may harm them; other persons require little protection beyond making sure they undertake activities freely and with awareness of possible adverse consequence. The extent of protection afforded should depend upon the risk of harm and the likelihood of benefit. The judgment that any individual lacks autonomy should be periodically reevaluated and will vary in different situations.

In most cases of research involving human subjects, respect for persons demands that subjects enter into the research voluntarily and with adequate information. In some situations, however, application of the principle is not obvious. The involvement of prisoners as subjects of research provides an instructive example. On the one hand, it would seem that the principle of respect for persons requires that prisoners not be deprived of the opportunity to volunteer for research. On the other hand, under prison conditions they may be subtly coerced or unduly influenced to engage in research activities for which they would not otherwise volunteer. Respect for persons would then dictate that prisoners be protected. Whether to allow prisoners to "volunteer" or to "protect" them presents a dilemma. Respecting persons, in most hard cases, is often a matter of balancing competing claims urged by the principle of respect itself.

2. Beneficence. -- Persons are treated in an ethical manner not only by respecting their decisions and protecting them from harm, but also by making efforts to secure their well-being. Such treatment falls under the principle of beneficence. The term "beneficence" is often understood to cover acts of kindness or charity that go beyond strict obligation. In this document, beneficence is understood in a stronger sense, as an obligation. Two general rules have been formulated as complementary expressions of beneficent actions in this sense: **(1)** do not harm and **(2)** maximize possible benefits and minimize possible harms.

The Hippocratic maxim "do no harm" has long been a fundamental principle of medical ethics. Claude Bernard extended it to the realm of research, saying that one should not injure one person regardless of the benefits that might come to others. However, even avoiding harm requires learning what is harmful; and, in the process of obtaining this information, persons may be exposed to risk of harm. Further, the Hippocratic Oath requires physicians to benefit their patients "according to their best judgment." Learning what will in fact benefit may require exposing persons to risk. The problem posed by these imperatives is to decide when it is justifiable to seek certain benefits despite the risks involved, and when the benefits should be foregone because of the risks.

The obligations of beneficence affect both individual investigators and society at large, because they extend both to particular research projects and to the entire enterprise of research. In the case of particular projects, investigators and members of their institutions are obliged to give forethought to the maximization of benefits and the

reduction of risk that might occur from the research investigation. In the case of scientific research in general, members of the larger society are obliged to recognize the longer term benefits and risks that may result from the improvement of knowledge and from the development of novel medical, psychotherapeutic, and social procedures.

The principle of beneficence often occupies a well-defined justifying role in many areas of research involving human subjects. An example is found in research involving children. Effective ways of treating childhood diseases and fostering healthy development are benefits that serve to justify research involving children -- even when individual research subjects are not direct beneficiaries. Research also makes it possible to avoid the harm that may result from the application of previously accepted routine practices that on closer investigation turn out to be dangerous. But the role of the principle of beneficence is not always so unambiguous. A difficult ethical problem remains, for example, about research that presents more than minimal risk without immediate prospect of direct benefit to the children involved. Some have argued that such research is inadmissible, while others have pointed out that this limit would rule out much research promising great benefit to children in the future. Here again, as with all hard cases, the different claims covered by the principle of beneficence may come into conflict and force difficult choices.

3. Justice. -- Who ought to receive the benefits of research and bear its burdens? This is a question of justice, in the sense of "fairness in distribution" or "what is deserved." An injustice occurs when some benefit to which a person is entitled is denied without good reason or when some burden is imposed unduly. Another way of conceiving the principle of justice is that equals ought to be treated equally. However, this statement requires explication. Who is equal and who is unequal? What considerations justify departure from equal distribution? Almost all commentators allow that distinctions based on experience, age, deprivation, competence, merit and position do sometimes constitute criteria justifying differential treatment for certain purposes. It is necessary, then, to explain in what respects people should be treated equally. There are several widely accepted formulations of just ways to distribute burdens and benefits. Each formulation mentions some relevant property on the basis of which burdens and benefits should be distributed. These formulations are **(1)** to each person an equal share, **(2)** to each person according to individual need, **(3)** to each person according to individual effort, **(4)** to each person according to societal contribution, and **(5)** to each person according to merit.

Questions of justice have long been associated with social practices such as punishment, taxation and political representation. Until recently these questions have not generally been associated with scientific research. However, they are foreshadowed even in the earliest reflections on the ethics of research involving human subjects. For example, during the 19th and early 20th centuries the burdens of serving as research subjects fell largely upon poor ward patients, while the benefits of improved medical care flowed primarily to private patients. Subsequently, the exploitation of unwilling prisoners as research subjects in Nazi concentration camps was condemned as a particularly flagrant injustice. In this country, in the 1940's, the Tuskegee syphilis study used disadvantaged, rural black men to study the untreated course of a disease that is

by no means confined to that population. These subjects were deprived of demonstrably effective treatment in order not to interrupt the project, long after such treatment became generally available.

Against this historical background, it can be seen how conceptions of justice are relevant to research involving human subjects. For example, the selection of research subjects needs to be scrutinized in order to determine whether some classes (e.g., welfare patients, particular racial and ethnic minorities, or persons confined to institutions) are being systematically selected simply because of their easy availability, their compromised position, or their manipulability, rather than for reasons directly related to the problem being studied. Finally, whenever research supported by public funds leads to the development of therapeutic devices and procedures, justice demands both that these not provide advantages only to those who can afford them and that such research should not unduly involve persons from groups unlikely to be among the beneficiaries of subsequent applications of the research.

Part C: Applications

C. Applications

Applications of the general principles to the conduct of research leads to consideration of the following requirements: informed consent, risk/benefit assessment, and the selection of subjects of research.

1. Informed Consent. -- Respect for persons requires that subjects, to the degree that they are capable, be given the opportunity to choose what shall or shall not happen to them. This opportunity is provided when adequate standards for informed consent are satisfied.

While the importance of informed consent is unquestioned, controversy prevails over the nature and possibility of an informed consent. Nonetheless, there is widespread agreement that the consent process can be analyzed as containing three elements: information, comprehension and voluntariness.

Information. Most codes of research establish specific items for disclosure intended to assure that subjects are given sufficient information. These items generally include: the research procedure, their purposes, risks and anticipated benefits, alternative procedures (where therapy is involved), and a statement offering the subject the opportunity to ask questions and to withdraw at any time from the research. Additional items have been proposed, including how subjects are selected, the person responsible for the research, etc.

However, a simple listing of items does not answer the question of what the standard should be for judging how much and what sort of information should be provided. One standard frequently invoked in medical practice, namely the information commonly provided by practitioners in the field or in the locale, is inadequate since research takes place precisely when a common understanding does not exist. Another standard, currently popular in malpractice law, requires the practitioner to reveal the information

that reasonable persons would wish to know in order to make a decision regarding their care. This, too, seems insufficient since the research subject, being in essence a volunteer, may wish to know considerably more about risks gratuitously undertaken than do patients who deliver themselves into the hand of a clinician for needed care. It may be that a standard of "the reasonable volunteer" should be proposed: the extent and nature of information should be such that persons, knowing that the procedure is neither necessary for their care nor perhaps fully understood, can decide whether they wish to participate in the furthering of knowledge. Even when some direct benefit to them is anticipated, the subjects should understand clearly the range of risk and the voluntary nature of participation.

A special problem of consent arises where informing subjects of some pertinent aspect of the research is likely to impair the validity of the research. In many cases, it is sufficient to indicate to subjects that they are being invited to participate in research of which some features will not be revealed until the research is concluded. In all cases of research involving incomplete disclosure, such research is justified only if it is clear that **(1)** incomplete disclosure is truly necessary to accomplish the goals of the research, **(2)** there are no undisclosed risks to subjects that are more than minimal, and **(3)** there is an adequate plan for debriefing subjects, when appropriate, and for dissemination of research results to them. Information about risks should never be withheld for the purpose of eliciting the cooperation of subjects, and truthful answers should always be given to direct questions about the research. Care should be taken to distinguish cases in which disclosure would destroy or invalidate the research from cases in which disclosure would simply inconvenience the investigator.

Comprehension. The manner and context in which information is conveyed is as important as the information itself. For example, presenting information in a disorganized and rapid fashion, allowing too little time for consideration or curtailing opportunities for questioning, all may adversely affect a subject's ability to make an informed choice.

Because the subject's ability to understand is a function of intelligence, rationality, maturity and language, it is necessary to adapt the presentation of the information to the subject's capacities. Investigators are responsible for ascertaining that the subject has comprehended the information. While there is always an obligation to ascertain that the information about risk to subjects is complete and adequately comprehended, when the risks are more serious, that obligation increases. On occasion, it may be suitable to give some oral or written tests of comprehension.

Special provision may need to be made when comprehension is severely limited -- for example, by conditions of immaturity or mental disability. Each class of subjects that one might consider as incompetent (e.g., infants and young children, mentally disable patients, the terminally ill and the comatose) should be considered on its own terms. Even for these persons, however, respect requires giving them the opportunity to choose to the extent they are able, whether or not to participate in research. The objections of these subjects to involvement should be honored, unless the research entails providing them a therapy unavailable elsewhere. Respect for persons also requires seeking the permission of other parties in order to protect the subjects from

harm. Such persons are thus respected both by acknowledging their own wishes and by the use of third parties to protect them from harm.

The third parties chosen should be those who are most likely to understand the incompetent subject's situation and to act in that person's best interest. The person authorized to act on behalf of the subject should be given an opportunity to observe the research as it proceeds in order to be able to withdraw the subject from the research, if such action appears in the subject's best interest.

Voluntariness. An agreement to participate in research constitutes a valid consent only if voluntarily given. This element of informed consent requires conditions free of coercion and undue influence. Coercion occurs when an overt threat of harm is intentionally presented by one person to another in order to obtain compliance. Undue influence, by contrast, occurs through an offer of an excessive, unwarranted, inappropriate or improper reward or other overture in order to obtain compliance. Also, inducements that would ordinarily be acceptable may become undue influences if the subject is especially vulnerable.

Unjustifiable pressures usually occur when persons in positions of authority or commanding influence -- especially where possible sanctions are involved -- urge a course of action for a subject. A continuum of such influencing factors exists, however, and it is impossible to state precisely where justifiable persuasion ends and undue influence begins. But undue influence would include actions such as manipulating a person's choice through the controlling influence of a close relative and threatening to withdraw health services to which an individual would otherwise be entitle.

2. Assessment of Risks and Benefits. -- The assessment of risks and benefits requires a careful arrayal of relevant data, including, in some cases, alternative ways of obtaining the benefits sought in the research. Thus, the assessment presents both an opportunity and a responsibility to gather systematic and comprehensive information about proposed research. For the investigator, it is a means to examine whether the proposed research is properly designed. For a review committee, it is a method for determining whether the risks that will be presented to subjects are justified. For prospective subjects, the assessment will assist the determination whether or not to participate.

The Nature and Scope of Risks and Benefits. The requirement that research be justified on the basis of a favorable risk/benefit assessment bears a close relation to the principle of beneficence, just as the moral requirement that informed consent be obtained is derived primarily from the principle of respect for persons. The term "risk" refers to a possibility that harm may occur. However, when expressions such as "small risk" or "high risk" are used, they usually refer (often ambiguously) both to the chance (probability) of experiencing a harm and the severity (magnitude) of the envisioned harm.

The term "benefit" is used in the research context to refer to something of positive value related to health or welfare. Unlike, "risk," "benefit" is not a term that expresses probabilities. Risk is properly contrasted to probability of benefits, and benefits are

properly contrasted with harms rather than risks of harm. Accordingly, so-called risk/benefit assessments are concerned with the probabilities and magnitudes of possible harm and anticipated benefits. Many kinds of possible harms and benefits need to be taken into account. There are, for example, risks of psychological harm, physical harm, legal harm, social harm and economic harm and the corresponding benefits. While the most likely types of harms to research subjects are those of psychological or physical pain or injury, other possible kinds should not be overlooked.

Risks and benefits of research may affect the individual subjects, the families of the individual subjects, and society at large (or special groups of subjects in society). Previous codes and Federal regulations have required that risks to subjects be outweighed by the sum of both the anticipated benefit to the subject, if any, and the anticipated benefit to society in the form of knowledge to be gained from the research. In balancing these different elements, the risks and benefits affecting the immediate research subject will normally carry special weight. On the other hand, interests other than those of the subject may on some occasions be sufficient by themselves to justify the risks involved in the research, so long as the subjects' rights have been protected. Beneficence thus requires that we protect against risk of harm to subjects and also that we be concerned about the loss of the substantial benefits that might be gained from research.

The Systematic Assessment of Risks and Benefits. It is commonly said that benefits and risks must be "balanced" and shown to be "in a favorable ratio." The metaphorical character of these terms draws attention to the difficulty of making precise judgments. Only on rare occasions will quantitative techniques be available for the scrutiny of research protocols. However, the idea of systematic, nonarbitrary analysis of risks and benefits should be emulated insofar as possible. This ideal requires those making decisions about the justifiability of research to be thorough in the accumulation and assessment of information about all aspects of the research, and to consider alternatives systematically. This procedure renders the assessment of research more rigorous and precise, while making communication between review board members and investigators less subject to misinterpretation, misinformation and conflicting judgments. Thus, there should first be a determination of the validity of the presuppositions of the research; then the nature, probability and magnitude of risk should be distinguished with as much clarity as possible. The method of ascertaining risks should be explicit, especially where there is no alternative to the use of such vague categories as small or slight risk. It should also be determined whether an investigator's estimates of the probability of harm or benefits are reasonable, as judged by known facts or other available studies.

Finally, assessment of the justifiability of research should reflect at least the following considerations: **(i)** Brutal or inhumane treatment of human subjects is never morally justified. **(ii)** Risks should be reduced to those necessary to achieve the research objective. It should be determined whether it is in fact necessary to use human subjects at all. Risk can perhaps never be entirely eliminated, but it can often be reduced by careful attention to alternative procedures. **(iii)** When research involves significant risk of serious impairment, review committees should be extraordinarily insistent on the

justification of the risk (looking usually to the likelihood of benefit to the subject -- or, in some rare cases, to the manifest voluntariness of the participation). **(iv)** When vulnerable populations are involved in research, the appropriateness of involving them should itself be demonstrated. A number of variables go into such judgments, including the nature and degree of risk, the condition of the particular population involved, and the nature and level of the anticipated benefits. **(v)** Relevant risks and benefits must be thoroughly arrayed in documents and procedures used in the informed consent process.

3. Selection of Subjects. -- Just as the principle of respect for persons finds expression in the requirements for consent, and the principle of beneficence in risk/benefit assessment, the principle of justice gives rise to moral requirements that there be fair procedures and outcomes in the selection of research subjects.

Justice is relevant to the selection of subjects of research at two levels: the social and the individual. Individual justice in the selection of subjects would require that researchers exhibit fairness: thus, they should not offer potentially beneficial research only to some patients who are in their favor or select only "undesirable" persons for risky research. Social justice requires that distinction be drawn between classes of subjects that ought, and ought not, to participate in any particular kind of research, based on the ability of members of that class to bear burdens and on the appropriateness of placing further burdens on already burdened persons. Thus, it can be considered a matter of social justice that there is an order of preference in the selection of classes of subjects (e.g., adults before children) and that some classes of potential subjects (e.g., the institutionalized mentally infirm or prisoners) may be involved as research subjects, if at all, only on certain conditions.

Injustice may appear in the selection of subjects, even if individual subjects are selected fairly by investigators and treated fairly in the course of research. Thus injustice arises from social, racial, sexual and cultural biases institutionalized in society. Thus, even if individual researchers are treating their research subjects fairly, and even if IRBs are taking care to assure that subjects are selected fairly within a particular institution, unjust social patterns may nevertheless appear in the overall distribution of the burdens and benefits of research. Although individual institutions or investigators may not be able to resolve a problem that is pervasive in their social setting, they can consider distributive justice in selecting research subjects.

Some populations, especially institutionalized ones, are already burdened in many ways by their infirmities and environments. When research is proposed that involves risks and does not include a therapeutic component, other less burdened classes of persons should be called upon first to accept these risks of research, except where the research is directly related to the specific conditions of the class involved. Also, even though public funds for research may often flow in the same directions as public funds for health care, it seems unfair that populations dependent on public health care constitute a pool of preferred research subjects if more advantaged populations are likely to be the recipients of the benefits.

One special instance of injustice results from the involvement of vulnerable subjects. Certain groups, such as racial minorities, the economically disadvantaged, the very sick,

and the institutionalized may continually be sought as research subjects, owing to their ready availability in settings where research is conducted. Given their dependent status and their frequently compromised capacity for free consent, they should be protected against the danger of being involved in research solely for administrative convenience, or because they are easy to manipulate as a result of their illness or socioeconomic condition.

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(1) Since 1945, various codes for the proper and responsible conduct of human experimentation in medical research have been adopted by different organizations. The best known of these codes are the Nuremberg Code of 1947, the Helsinki Declaration of 1964 (revised in 1975), and the 1971 Guidelines (codified into Federal Regulations in 1974) issued by the U.S. Department of Health, Education, and Welfare Codes for the conduct of social and behavioral research have also been adopted, the best known being that of the American Psychological Association, published in 1973.

(2) Although practice usually involves interventions designed solely to enhance the well-being of a particular individual, interventions are sometimes applied to one individual for the enhancement of the well-being of another (e.g., blood donation, skin grafts, organ transplants) or an intervention may have the dual purpose of enhancing the well-being of a particular individual, and, at the same time, providing some benefit to others (e.g., vaccination, which protects both the person who is vaccinated and society generally). The fact that some forms of practice have elements other than immediate benefit to the individual receiving an intervention, however, should not confuse the general distinction between research and practice. Even when a procedure applied in practice may benefit some other person, it remains an intervention designed to enhance the well-being of a particular individual or groups of individuals; thus, it is practice and need not be reviewed as research.

(3) Because the problems related to social experimentation may differ substantially from those of biomedical and behavioral research, the Commission specifically declines to make any policy determination regarding such research at this time. Rather, the Commission believes that the problem ought to be addressed by one of its successor bodies.

Appendix B

Code of Federal Regulations

Title 45
Public Welfare

Department of Health and Human Services
National Institutes of Health
Office for Human Research Protections

Part 46
Protection of Human Subjects

Web Site: http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.htm#46.110

Code of Federal Regulations

TITLE 45
PUBLIC WELFARE

DEPARTMENT OF HEALTH AND HUMAN SERVICES
NATIONAL INSTITUTES OF HEALTH
OFFICE FOR PROTECTION FROM RESEARCH RISKS

PART 46
PROTECTION OF HUMAN SUBJECTS

* * *

Revised November 13, 2001
Effective December 13, 2001

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Subpart A -- Federal Policy for the Protection of Human Subjects (Basic DHHS Policy for Protection of Human Research Subjects)

Sec.

Subpart B -- Additional Protections for Pregnant Women, Human Fetuses and Neonates Involved in Research

Sec.

women, fetuses, or neonates.

Subpart C -- Additional DHHS Protections Pertaining to Biomedical and Behavioral Research Involving Prisoners as Subjects

Sec.

Subpart D -- Additional DHHS Protections for Children Involved as Subjects in Research

Sec.

Authority: 5 U.S.C. 301; Sec. 474(a), 88 Stat. 352 (42 U.S.C. 2891-3(a)).

Note: As revised, Subpart A of the DHHS regulations incorporates the Common Rule (Federal Policy) for the Protection of Human Subjects (56 FR 28003). Subpart D of the HHS regulations has been amended at Section 46.401(b) to reference the revised Subpart A.

The Common Rule (Federal Policy) is also codified at

7 CFR Part 1c	**Department of Agriculture**
10 CFR Part 745	**Department of Energy**
14 CFR Part 1230	**National Aeronautics and Space Administration**
15 CFR Part 27	**Department of Commerce**
16 CFR Part 1028	**Consumer Product Safety Commission**
22 CFR Part 225	**International Development Cooperation Agency,Agency for International Development**
24 CFR Part 60	**Department of Housing and Urban Development**
28 CFR Part 46	**Department of Justice**
32 CFR Part 219	**Department of Defense**
34 CFR Part 97	**Department of Education**
38 CFR Part 16	**Department of Veterans Affairs**
40 CFR Part 26	**Environmental Protection Agency**
b>45 CFR Part 690	**National Science Foundation**
49 CFR Part 11	**Department of Transportation**

TITLE 45
CODE OF FEDERAL REGULATIONS
PART 46

PROTECTION OF HUMAN SUBJECTS

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Revised June 18, 1991
Effective August 19, 1991

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Subpart A	**Federal Policy for the Protection of Human Subjects (Basic DHHS Policy for Protection of Human Research Subjects)**

Source: 56 FR 28003, June 18, 1991.

§46.101 To what does this policy apply?

(a) Except as provided in paragraph (b) of this section, this policy applies to all research involving human subjects conducted, supported or otherwise subject to regulation by any Federal Department or Agency which takes appropriate administrative action to make the policy applicable to such research. This includes research conducted by Federal civilian employees or military personnel, except that each Department or Agency head may adopt such procedural modifications as may be appropriate from an administrative standpoint. It also includes research conducted, supported, or otherwise subject to regulation by the Federal Government outside the United States.

(1) Research that is conducted or supported by a Federal Department or Agency, whether or not it is regulated as defined in §46.102(e), must comply with all sections of this policy.

(2) Research that is neither conducted nor supported by a Federal Department or Agency but is subject to regulation as defined in §46.102(e) must be reviewed and approved, in compliance with §46.101, §46.102, and §46.107 through §46.117 of this policy, by an Institutional Review Board (IRB) thatoperates in accordance with the pertinent requirements of this policy.

(b) Unless otherwise required by Department or Agency heads, research activities in which the only involvement of human subjects will be in one or more of the following categories are exempt from this policy:[1]

(1) Research conducted in established or commonly accepted educational settings, involving normal educational practices, such as (i) research on regular and special education instructional strategies, or (ii) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

(2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless:
(i) information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.

(3) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior that is not exempt under paragraph (b)(2) of this section, if:
(i) the human subjects are elected or appointed public officials or candidates for public office; or (ii) Federal statute(s) require(s) without exception that the confidentiality of the personally identifiable information will be maintained throughout the research and thereafter.

(4) Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is

recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

(5) Research and demonstration projects which are conducted by or subject to the approval of Department or Agency heads, and which are designed to study, evaluate, or otherwise examine: (i) Public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs.

(6) Taste and food quality evaluation and consumer acceptance studies, (i) if wholesome foods without additives are consumed or (ii) if a food isconsumed that contains a food ingredient at or below the level and for a use found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.

(c) Department or Agency heads retain final judgment as to whether a particular activity is covered by this policy.

(d) Department or Agency heads may require that specific research activities or classes of research activities conducted, supported, or otherwise subject to regulation by the Department or Agency but not otherwise covered by this policy, comply with some or all of the requirements of this policy.

(e) Compliance with this policy requires compliance with pertinent Federal laws or regulations which provide additional protections for human subjects.

(f) This policy does not affect any State or local laws or regulations which may otherwise be applicable and which provide additional protections for human subjects.

(g) This policy does not affect any foreign laws or regulations which may otherwise be applicable and which provide additional protections to human subjects of research.

(h) When research covered by this policy takes place in foreign countries, procedures normally followed in the foreign countries to protect human subjects may differ from those set forth in this policy. [An example is a foreign institution which complies with guidelines consistent with the World Medical Assembly Declaration (Declaration of Helsinki amended 1989) issued either by sovereign states or by an organization whose function for the protection of human research subjects is internationally recognized.] In these circumstances, if a Department or Agency head determines that the procedures prescribed by the institution afford protections that are at least equivalent to those provided in this policy, the Department or Agency head may approve the substitution of the foreign procedures in lieu of the procedural requirements provided in this policy. Except when otherwise required by statute, Executive Order, or the Department or Agency head, notices of these actions as they occur will be published in the **Federal Register** or will be otherwise published as provided in Department or Agency procedures.

(i) Unless otherwise required by law, Department or Agency heads may waive the applicability of some or all of the provisions of this policy to specific research activities or classes or research activities otherwise covered by this policy. Except when otherwise required by statute or Executive Order, the Department or Agencyhead shall forward advance notices of these actions to the Office for Protection from Research Risks, National Institutes of Health, Department of Health and Human Services (DHHS), and shall also publish them in the **Federal Register** or in such other manner as provided in Department or Agency procedures.[1]

[1] Institutions with DHHS-approved assurances on file will abide by provisions of Title 45 CFR Part 46 Subparts A-D. Some of the other departments and agencies have incorporated all provisions of Title 45 CFR Part 46 into their policies and procedures as well. However, the exemptions at 45 CFR 46.101(b) do not apply to research involving prisoners, fetuses, pregnant women, or human in vitro fertilization, Subparts B and C. The exemption at 45 CFR 46.101(b)(2), for research involving survey or interview procedures or observation of public behavior, does not apply to research with children, Subpart D, except for research involving observations of public behavior when the investigator(s) do not participate in the activities being observed.

§46.102 Definitions.

(a) *Department or Agency* head means the head of any Federal Department or Agency and any other officer or employee of any Department or Agency to whom authority has been delegated.

(b) *Institution* means any public or private entity or Agency (including Federal, State, and other agencies).

(c) *Legally authorized representative* means an individual or judicial or other body authorized under applicable law to consent on behalf of a prospective subject to the subject's participation in the procedure(s) involved in the research.

(d) *Research* means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes. For example, some demonstration and service programs may include research activities.

(e) *Research subject to regulation*, and similar terms are intended to encompass those research activities for which a Federal Department or Agency has specific responsibility for regulating as a research activity, (for example, Investigational New Drug requirements administered by the Food and Drug Administration). It does not include research activities which are incidentallyregulated by a Federal Department or Agency solely as part of the Department's or Agency's broader responsibility to regulate certain types of activities whether research or non-research in nature (for example, Wage and Hour requirements administered by the Department of Labor).

(f) *Human subject* means a living individual about whom an investigator (whether professional or student) conducting research obtains

(1) data through intervention or interaction with the individual, or

(2) identifiable private information.

Intervention includes both physical procedures by which data are gathered (for example, venipuncture) and manipulations of the subject or the subject's environment that are performed for research purposes. *Interaction* includes communication or interpersonal contact between investigator and subject. *Private information* includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record). Private information must be individually identifiable (i.e., the identity of the subject is or may readily be ascertained by the investigator or associated with the information) in order for obtaining the information to constitute research involving human subjects.

(g) *IRB* means an Institutional Review Board established in accord with and for the purposes expressed in this policy.

(h) *IRB approval* means the determination of the IRB that the research has been reviewed and may be conducted at an institution within the constraints set forth by the IRB and by other institutional and Federal requirements.

(i) *Minimal risk* means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.

(j) *Certification* means the official notification by the institution to the supporting Department or Agency, in accordance with the requirements of this policy, that a research project or activity involving human subjects has been reviewed and approved by an IRB in accordance with an approved assurance.

§46.103 Assuring compliance with this policy -- research conducted or supported by any Federal Department or Agency.

(a) Each institution engaged in research which is covered by this policy and which is conducted or supported by a Federal Department or Agency shall providewritten assurance satisfactory to the Department or Agency head that it will comply with the requirements set forth in this policy. In lieu of requiring submission of an assurance, individual Department or Agency heads shall accept the existence of a current assurance, appropriate for the research in question, on file with the Office for Protection from Research Risks, National Institutes Health, DHHS, and approved for Federalwide use by that office. When the existence of an DHHS-approved assurance is accepted in lieu of requiring submission of an assurance, reports (except certification) required by this policy to be made to Department and Agency heads shall also be made to the Office for Protection from Research Risks, National Institutes of Health, DHHS.

(b) Departments and agencies will conduct or support research covered by this policy only if the institution has an assurance approved as provided in this section, and only if the institution has certified to the Department or Agency head that the research has been reviewed and approved by an

IRB provided for in the assurance, and will be subject to continuing review by the IRB. Assurances applicable to federally supported or conducted research shall at a minimum include:

(1) A statement of principles governing the institution in the discharge of its responsibilities for protecting the rights and welfare of human subjects of research conducted at or sponsored by the institution, regardless of whether the research is subject to Federal regulation. This may include an appropriate existing code, declaration, or statement of ethical principles, or a statement formulated by the institution itself. This requirement does not preempt provisions of this policy applicable to Department- or Agency-supported or regulated research and need not be applicable to any research exempted or waived under §46.101 (b) or (i).

(2) Designation of one or more IRBs established in accordance with the requirements of this policy, and for which provisions are made for meeting space and sufficient staff to support the IRB's review and recordkeeping duties.

(3) A list of IRB members identified by name; earned degrees; representative capacity; indications of experience such as board certifications, licenses, etc., sufficient to describe each member's chief anticipated contributions to IRB deliberations; and any employment or other relationship between each member and the institution; for example: full-time employee, part-time employee, member of governing panel or board, stockholder, paid or unpaid consultant. Changes in IRB membership shall be reported to the Department or Agency head, unless in accord with §46.103(a) of this policy, the existence of a DHHS-approved assurance is accepted. In this case, change in IRB membership shall be reported to the Office for Protection from Research Risks, National Institutes of Health, DHHS.

(4) Written procedures which the IRB will follow (i) for conducting its initial and continuing review of research and for reporting its findings and actions to the investigator and the institution; (ii) for determining which projects require review more often than annually and which projects need verification from sources other than the investigators that no material changes have occurred since previous IRB review; and (iii) for ensuring prompt reporting to the IRB of proposed changes in a research activity, and for ensuring that such changes in approved research, during the period for which IRB approval has already been given, may not be initiated without IRB review and approval except when necessary to eliminate apparent immediate hazards to the subject.

(5) Written procedures for ensuring prompt reporting to the IRB, appropriate institutional officials, and the Department or Agency head of (i) any unanticipated problems involving risks to subjects or others or any serious or continuing noncompliance with this policy or the requirements or determinations of the IRB; and (ii) any suspension or termination of IRB approval.

(c) The assurance shall be executed by an individual authorized to act for the institution and to assume on behalf of the institution the obligations imposed by this policy and shall be filed in such form and manner as the Department or Agency head prescribes.

(d) The Department or Agency head will evaluate all assurances submitted in accordance with this policy through such officers and employees of the Department or Agency and such experts or consultants engaged for this purpose as the Department or Agency head determines to be appropriate. The Department or Agency head's evaluation will take into consideration the adequacy of the proposed IRB in light of the anticipated scope of the institution's research activities and the types of subject populations likely to be involved, the appropriateness of the proposed initial and continuing review procedures in light of the probable risks, and the size and complexity of the institution.

(e) On the basis of this evaluation, the Department or Agency head may approve or disapprove the assurance, or enter into negotiations to develop an approvable one. The Department or Agency head may limit the period during which any particular approved assurance or class of approved assurances shall remain effective or otherwise condition or restrict approval.

(f) Certification is required when the research is supported by a Federal Department or Agency and not otherwise exempted or waived under §46.101 (b) or (i). An institution with an approved assurance shall certify that each application or proposal for research covered by the assurance and by §46.103 of this policy has been reviewed and approved by the IRB. Such certification must be submitted with the application or proposal or by such later date as may be prescribed by the Department or Agency to which the application or proposal is submitted. Under no condition shall research covered by §46.103 of the policy be supported prior to receipt of the certification that the research has been reviewed and approved by the IRB. Institutions without an approved assurance covering the research shall certify within 30 days after receipt of a request for such a certification from the Department or Agency, that the application or proposal has been approved by the IRB. If the certification is not submitted within these time limits, the application or proposal may be returned to the institution.
(Approved by the Office of Management and Budget under Control Number 9999-0020.)

§§46.104--46.106 [Reserved]

§46.107 IRB membership.

(a) Each IRB shall have at least five members, with varying backgrounds to promote complete and adequate review of research activities commonly conducted by the institution. The IRB shall be sufficiently qualified through the experience and expertise of its members, and the diversity of the members, including consideration of race, gender, and cultural backgrounds and sensitivity to such issues as community attitudes, to promote respect for its advice and counsel in safeguarding the rights and welfare of human subjects. In addition to possessing the professional competence necessary to review specific research activities, the IRB shall be able to ascertain the acceptability of proposed research in terms of institutional commitments and regulations, applicable law, and standards of professional conduct and practice. The IRB shall therefore include persons knowledgeable in these areas. If an IRB regularly reviews research that involves a vulnerable category of subjects, such as children, prisoners, pregnant women, or handicapped or mentally disabled persons, consideration shall be given to the inclusion of one or more individuals who are knowledgeable about and experienced in working with these subjects.

(b) Every nondiscriminatory effort will be made to ensure that no IRB consists entirely of men or entirely of women, including the institution's consideration of qualified persons of both sexes, so long

as no selection is made to the IRB on the basis of gender. No IRB may consist entirely of members of one profession.

(c) Each IRB shall include at least one member whose primary concerns are in scientific areas and at least one member whose primary concerns are in nonscientific areas.

(d) Each IRB shall include at least one member who is not otherwise affiliated with the institution and who is not part of the immediate family of a person who is affiliated with the institution.

(e) No IRB may have a member participate in the IRB's initial or continuing review of any project in which the member has a conflicting interest, except to provide information requested by the IRB.

(f) An IRB may, in its discretion, invite individuals with competence in special areas to assist in the review of issues which require expertise beyond or in addition to that available on the IRB. These individuals may not vote with the IRB

§46.108 IRB functions and operations.

In order to fulfill the requirements of this policy each IRB shall:

(a) Follow written procedures in the same detail as described in §46.103(b)(4) and to the extent required by §46.103(b)(5).

(b) Except when an expedited review procedure is used (see §46.110), review proposed research at convened meetings at which a majority of the members of the IRB are present, including at least one member whose primary concerns are in nonscientific areas. In order for the research to be approved, it shall receive the approval of a majority of those members present at the meeting

§46.109 IRB review of research.

(a) An IRB shall review and have authority to approve, require modifications in (to secure approval), or disapprove all research activities covered by this policy.

(b) An IRB shall require that information given to subjects as part of informed consent is in accordance with §46.116. The IRB may require that information, in addition to that specifically mentioned in §46.116, be given to the subjects when in the IRB's judgment the information would meaningfully add to the protection of the rights and welfare of subjects.

(c) An IRB shall require documentation of informed consent or may waive documentation in accordance with §46.117.

(d) An IRB shall notify investigators and the institution in writing of its decision to approve or disapprove the proposed research activity, or of modifications required to secure IRB approval of the research activity. If the IRB decides to disapprove a research activity, it shall include in its written notification a statement of the reasons for its decision and give the investigator an opportunity to respond in person or in writing.

(e) An IRB shall conduct continuing review of research covered by this policy at intervals appropriate to the degree of risk, but not less than once per year, and shall have authority to observe or have a

third party observe the consent process and the research.
(Approved by the Office of Management and Budget under Control Number 9999-0020.)

§46.110 Expedited review procedures for certain kinds of research involving no more than minimal risk, and for minor changes in approved research.

(a) The Secretary, HHS, has established, and published as a Notice in the **Federal Register**, a list of categories of research that may be reviewed by the IRB through an expedited review procedure. The list will be amended, as appropriate, after consultation with other departments and agencies, through periodic republication by the Secretary, HHS, in the Federal Register. A copy of the list is available from the Office for Protection from Research Risks, National Institutes of Health, DHHS, Bethesda, Maryland 20892.

(b) An IRB may use the expedited review procedure to review either or both of the following:

(1) some or all of the research appearing on the list and found by the reviewer(s) to involve no more than minimal risk,

(2) minor changes in previously approved research during the period (of one year or less) for which approval is authorized.

Under an expedited review procedure, the review may be carried out by the IRB chairperson or by one or more experienced reviewers designated by the chairperson from among members of the IRB. In reviewing the research, the reviewers may exercise all of the authorities of the IRB except that the reviewers may not disapprove the research. A research activity may be disapproved only after review in accordance with the non-expedited procedure set forth in §46.108(b).

(c) Each IRB which uses an expedited review procedure shall adopt a method for keeping all members advised of research proposals which have been approved under the procedure.

(d) The Department or Agency head may restrict, suspend, terminate, or choose not to authorize an institution's or IRB's use of the expedited review procedure.

§46.111 Criteria for IRB approval of research.

(a) In order to approve research covered by this policy the IRB shall determine that all of the following requirements are satisfied:

(1) Risks to subjects are minimized: (i) by using procedures which are consistent with sound research design and which do not unnecessarily expose subjects to risk, and (ii) whenever appropriate, by using procedures already being performed on the subjects for diagnostic or treatment purposes.

(2) Risks to subjects are reasonable in relation to anticipated benefits, if any, to subjects, and the importance of the knowledge that may reasonably be expected to result. In evaluating risks and benefits, the IRB should consider only those risks and benefits that may result from the research (as distinguished from risks and benefits of therapies subjects would receive even if not participating in the research). The IRB should not consider possible long-range effects of applying knowledge gained

in the research (for example, the possible effects of the research on public policy) as among those research risks that fall within the purview of its responsibility.

(3) Selection of subjects is equitable. In making this assessment the IRB should take into account the purposes of the research and the setting in which the research will be conducted and should be particularly cognizant of the special problems of research involving vulnerable populations, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons.

(4) Informed consent will be sought from each prospective subject or the subject's legally authorized representative, in accordance with, and to the extent required by §46.116.

(5) Informed consent will be appropriately documented, in accordance with, and to the extent required by §46.117.

(6) When appropriate, the research plan makes adequate provision for monitoring the data collected to ensure the safety of subjects.

(7) When appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of data.

(b) When some or all of the subjects are likely to be vulnerable to coercion or undue influence, such as children, prisoners, pregnant women, mentally disabled persons, or economically or educationally disadvantaged persons, additional safeguards have been included in the study to protect the rights and welfare of these subjects.

§46.112 Review by institution.

Research covered by this policy that has been approved by an IRB may be subject to further appropriate review and approval or disapproval by officials of the institution. However, those officials may not approve the research if it has not been approved by an IRB.

§46.113 Suspension or termination of IRB approval of research.

An IRB shall have authority to suspend or terminate approval of research that is not being conducted in accordance with the IRB's requirements or that has been associated with unexpected serious harm to subjects. Any suspension or termination or approval shall include a statement of the reasons for the IRB's action and shall be reported promptly to the investigator, appropriate institutional officials, and the Department or Agency head.
(Approved by the Office of Management and Budget under Control Number 9999-0020.)

§46.114 Cooperative research.

Cooperative research projects are those projects covered by this policy which involve more than one institution. In the conduct of cooperative research projects, each institution is responsible for safeguarding the rights and welfare of human subjects and for complying with this policy. With the

approval of the Department or Agency head, an institution participating in a cooperative project may enter into a joint review arrangement, rely upon the review of another qualified IRB, or make similar arrangements for avoiding duplication of effort.

§46.115 IRB records.

(a) An institution, or when appropriate an IRB, shall prepare and maintain adequate documentation of IRB activities, including the following:

(1) Copies of all research proposals reviewed, scientific evaluations, if any, that accompany the proposals, approved sample consent documents, progress reports submitted by investigators, and reports of injuries to subjects.

(2) Minutes of IRB meetings which shall be in sufficient detail to show attendance at the meetings; actions taken by the IRB; the vote on these actions including the number of members voting for, against, and abstaining; the basis for requiring changes in or disapproving research; and a written summary of the discussion of controverted issues and their resolution.

(3) Records of continuing review activities.

(4) Copies of all correspondence between the IRB and the investigators.

(5) A list of IRB members in the same detail as described in §46.103(b)(3).

(6) Written procedures for the IRB in the same detail as described in §46.103(b)(4) and §46.103(b)(5).

(7) Statements of significant new findings provided to subjects, as required by §46.116(b)(5).

(b) The records required by this policy shall be retained for at least 3 years, and records relating to research which is conducted shall be retained for at least 3 years after completion of the research. All records shall be accessible for inspection and copying by authorized representatives of the Department or Agency at reasonable times and in a reasonable manner.
(Approved by the Office of Management and Budget under Control Number 9999-0020.)

§46.116 General requirements for informed consent.

Except as provided elsewhere in this policy, no investigator may involve a human being as a subject in research covered by this policy unless the investigator has obtained the legally effective informed consent of the subject or the subject's legally authorized representative. An investigator shall seek such consent only under circumstances that provide the prospective subject or the representative sufficient opportunity to consider whether or not to participate and that minimize the possibility of coercion or undue influence. The information that is given to the subject or the representative shall be in language understandable to the subject or the representative. No informed consent, whether oral or written, may include any exculpatory language through which the subject or the representative is made to waive or appear to waive any of the subject's legal rights, or releases or appears to release the investigator, the sponsor, the institution or its agents from liability for negligence.

(a) Basic elements of informed consent. Except as provided in paragraph (c) or (d) of this section, in seeking informed consent the following information shall be provided to each subject:

(1) a statement that the study involves research, an explanation of the purposes of the research and the expected duration of the subject's participation, a description of the procedures to be followed, and identification of any procedures which are experimental;

(2) a description of any reasonably foreseeable risks or discomforts to the subject;

(3) a description of any benefits to the subject or to others which may reasonably be expected from the research;

(4) a disclosure of appropriate alternative procedures or courses of treatment, if any, that might be advantageous to the subject;

(5) a statement describing the extent, if any, to which confidentiality of records identifying the subject will be maintained;

(6) for research involving more than minimal risk, an explanation as to whether any compensation and an explanation as to whether any medical treatments are available if injury occurs and, if so, what they consist of, or where further information may be obtained;

(7) an explanation of whom to contact for answers to pertinent questions about the research and research subjects' rights, and whom to contact in the event of a research-related injury to the subject; and

(8) a statement that participation is voluntary, refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled, and the subject may discontinue participation at any time without penalty or loss of benefits to which the subject is otherwise entitled.

(b) additional elements of informed consent. When appropriate, one or more of the following elements of information shall also be provided to each subject:

(1) a statement that the particular treatment or procedure may involve risks to the subject (or to the embryo or fetus, if the subject is or may become pregnant) which are currently unforeseeable;

(2) anticipated circumstances under which the subject's participation may be terminated by the investigator without regard to the subject's consent;

(3) any additional costs to the subject that may result from participation in the research;

(4) the consequences of a subject's decision to withdraw from the research and procedures for orderly termination of participation by the subject;

(5) A statement that significant new findings developed during the course of the research which may relate to the subject's willingness to continue participation will be provided to the subject; and

(6) the approximate number of subjects involved in the study.

(c) An IRB may approve a consent procedure which does not include, or which alters, some or all of the elements of informed consent set forth above, or waive the requirement to obtain informed consent provided the IRB finds and documents that:

(1) the research or demonstration project is to be conducted by or subject to the approval of state or local government officials and is designed to study, evaluate, or otherwise examine: (i) public benefit or service programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under those programs; and

(2) the research could not practicably be carried out without the waiver or alteration.

(d) An IRB may approve a consent procedure which does not include, or which alters, some or all of the elements of informed consent set forth in this section, or waive the requirements to obtain informed consent provided the IRB finds and documents that:

(1) the research involves no more than minimal risk to the subjects;

(2) the waiver or alteration will not adversely affect the rights and welfare of the subjects;

(3) the research could not practicably be carried out without the waiver or alteration; and

(4) whenever appropriate, the subjects will be provided with additional pertinent information after participation.

(e) The informed consent requirements in this policy are not intended to preempt any applicable Federal, State, or local laws which require additional information to be disclosed in order for informed consent to be legally effective.

(f) Nothing in this policy is intended to limit the authority of a physician to provide emergency medical care, to the extent the physician is permitted to do so under applicable Federal, State, or local law. (Approved by the Office of Management and Budget under Control Number 9999-0020.)

§46.117 Documentation of informed consent.

(a) Except as provided in paragraph (c) of this section, informed consent shall be documented by the use of a written consent form approved by the IRB and signed by the subject or the subject's legally authorized representative. A copy shall be given to the person signing the form.

(b) Except as provided in paragraph (c) of this section, the consent form may be either of the following:

(1) A written consent document that embodies the elements of informed consent required by §46.116. This form may be read to the subject or the subject's legally authorized representative, but in any

event, the investigator shall give either the subject or the representative adequate opportunity to read it before it is signed; or

(2) A short form written consent document stating that the elements of informed consent required by §46.116 have been presented orally to the subject or the subject's legally authorized representative. When this method is used, there shall be a witness to the oral presentation. Also, the IRB shall approve a written summary of what is to be said to the subject or the representative. Only the short form itself is to be signed by the subject or the representative. However, the witness shall sign both the short form and a copy of the summary, and the person actually obtaining consent shall sign a copy of the summary. A copy of the summary shall be given to the subject or the representative, in addition to a copy of the short form.

(c) An IRB may waive the requirement for the investigator to obtain a signed consent form for some or all subjects if it finds either:

(1) That the only record linking the subject and the research would be the consent document and the principal risk would be potential harm resulting from a breach of confidentiality. Each subject will be asked whether the subject wants documentation linking the subject with the research, and the subject's wishes will govern; or

(2) That the research presents no more than minimal risk of harm to subjects and involves no procedures for which written consent is normally required outside of the research context.

In cases in which the documentation requirement is waived, the IRB may require the investigator to provide subjects with a written statement regarding the research.
(Approved by the Office of Management and Budget under Control Number 9999-0020.)

§46.118 Applications and proposals lacking definite plans for involvement of human subjects.

Certain types of applications for grants, cooperative agreements, or contracts are submitted to departments or agencies with the knowledge that subjects may be involved within the period of support, but definite plans would not normally be set forth in the application or proposal. These include activities such as institutional type grants when selection of specific projects is the institution's responsibility; research training grants in which the activities involving subjects remain to be selected; and projects in which human subjects' involvement will depend upon completion of instruments, prior animal studies, or purification of compounds. These applications need not be reviewed by an IRB before an award may be made. However, except for research exempted or waived under §46.101 (b) or (i), no human subjects may be involved in any project supported by these awards until the project has been reviewed and approved by the IRB, as provided in this policy, and certification submitted, by the institution, to the Department or Agency.

§46.119 Research undertaken without the intention of involving human subjects.

In the event research is undertaken without the intention of involving human subjects, but it is later proposed to involve human subjects in the research, the research shall first be reviewed and approved

by an IRB, as provided in this policy, a certification submitted, by the institution, to the Department or Agency, and final approval given to the proposed change by the Department or Agency.

§46.120 Evaluation and disposition of applications and proposals for research to be conducted or supported by a Federal Department or Agency.

(a) The Department or Agency head will evaluate all applications and proposals involving human subjects submitted to the Department or Agency through such officers and employees of the Department or Agency and such experts and consultants as the Department or Agency head determines to be appropriate. This evaluation will take into consideration the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained.

(b) On the basis of this evaluation, the Department or Agency head may approve or disapprove the application or proposal, or enter into negotiations to develop an approvable one.

§46.121 [Reserved]

§46.122 Use of Federal funds.

Federal funds administered by a Department or Agency may not be expended for research involving human subjects unless the requirements of this policy have been satisfied.

§46.123 Early termination of research support: Evaluation of applications and proposals.

(a) The Department or Agency head may require that Department or Agency support for any project be terminated or suspended in the manner prescribed in applicable program requirements, when the Department or Agency head finds an institution has materially failed to comply with the terms of this policy.

(b) In making decisions about supporting or approving applications or proposals covered by this policy the Department or Agency head may take into account, in addition to all other eligibility requirements and program criteria, factors such as whether the applicant has been subject to a termination or suspension under paragraph (a) of this section and whether the applicant or the person or persons who would direct or has/have directed the scientific and technical aspects of an activity has/have, in the judgment of the Department or Agency head, materially failed to discharge responsibility for the protection of the rights and welfare of human subjects (whether or not the research was subject to Federal regulation).

§46.124 Conditions.

With respect to any research project or any class of research projects the Department or Agency head may impose additional conditions prior to or at the time of approval when in the judgment of the Department or Agency head additional conditions are necessary for the protection of human subjects.

Subpart B	**Additional Protections for Pregnant Women, Human Fetuses and Neonates Involved in Research**
	Source: Federal Register: November 13, 2001 (Volume 66, Number 219), Rules and Regulations,

	Page 56775-56780, from the Federal Register Online via GPO Access [wais.access.gpo.gov] [DOCID:fr13no01-9].

§46.201 To what do these regulations apply?

(a) Except as provided in paragraph (b) of this section, this subpart applies to all research involving pregnant women, human fetuses, neonates of uncertain viability, or nonviable neonates conducted or supported by the Department of Health and Human Services (DHHS). This includes all research conducted in DHHS facilities by any person and all research conducted in any facility by DHHS employees.

(b) The exemptions at Sec. 46.101(b)(1) through (6) are applicable to this subpart.

(c) The provisions of Sec. 46.101(c) through (i) are applicable to this subpart. Reference to State or local laws in this subpart and in Sec. 46.101(f) is intended to include the laws of federally recognized American Indian and Alaska Native Tribal Governments.

(d) The requirements of this subpart are in addition to those imposed under the other subparts of this part.

§46.202 Definitions.

The definitions in Sec. 46.102 shall be applicable to this subpart as well. In addition, as used in this subpart:

(a) Dead fetus means a fetus that exhibits neither heartbeat, spontaneous respiratory activity, spontaneous movement of voluntary muscles, nor pulsation of the umbilical cord.

(b) Delivery means complete separation of the fetus from the woman by expulsion or extraction or any other means.

(c) Fetus means the product of conception from implantation until delivery.

(d) Neonate means a newborn.

(e) Nonviable neonate means a neonate after delivery that, although living, is not viable.

(f) Pregnancy encompasses the period of time from implantation until delivery. A woman shall be assumed to be pregnant if she exhibits any of the pertinent presumptive signs of pregnancy, such as missed menses, until the results of a pregnancy test are negative or until delivery.

(g) Secretary means the Secretary of Health and Human Services and any other officer or employee of the Department of Health and Human Services to whom authority has been delegated.

(h) Viable, as it pertains to the neonate, means being able, after delivery, to survive (given the benefit of available medical therapy) to the point of independently maintaining heartbeat and respiration. The Secretary may from time to time, taking into account medical advances, publish in the Federal Register guidelines to assist in determining whether a neonate is viable for purposes of this subpart. If a neonate is viable then it may be included in research only to the extent permitted and in accordance with the requirements of subparts A and D of this part.

§46.203 Duties of IRBs in connection with research involving pregnant women, fetuses, and neonates.

In addition to other responsibilities assigned to IRBs under this part, each IRB shall review research covered by this subpart and approve only research which satisfies the conditions of all applicable sections of this subpart and the other subparts of this part.

§46.204 Research involving pregnant women or fetuses.

Pregnant women or fetuses may be involved in research if all of the following conditions are met:

(a) Where scientifically appropriate, preclinical studies, including studies on pregnant animals, and clinical studies, including studies on nonpregnant women, have been conducted and provide data for assessing potential risks to pregnant women and fetuses;

(b) The risk to the fetus is caused solely by interventions or procedures that hold out the prospect of direct benefit for the woman or the fetus; or, if there is no such prospect of benefit, the risk to the fetus is not greater than minimal and the purpose of the research is the development of important biomedical knowledge which cannot be obtained by any other means;

(c) Any risk is the least possible for achieving the objectives of the research;

(d) If the research holds out the prospect of direct benefit to the pregnant woman, the prospect of a direct benefit both to the pregnant woman and the fetus, or no prospect of benefit for the woman nor the fetus when risk to the fetus is not greater than minimal and the purpose of the research is the development of important biomedical knowledge that cannot be obtained by any other means, her consent is obtained in accord with the informed consent provisions of subpart A of this part;

(e) If the research holds out the prospect of direct benefit solely to the fetus then the consent of the pregnant woman and the father is obtained in accord with the informed consent provisions of subpart A of this part, except that the father's consent need not be obtained if he is unable to consent because of unavailability, incompetence, or temporary incapacity or the pregnancy resulted from rape or incest.

(f) Each individual providing consent under paragraph (d) or (e) of this section is fully informed regarding the reasonably foreseeable impact of the research on the fetus or neonate;

(g) For children as defined in Sec. 46.402(a) who are pregnant, assent and permission are obtained in accord with the provisions of subpart D of this part;

(h) No inducements, monetary or otherwise, will be offered to terminate a pregnancy;

(i) Individuals engaged in the research will have no part in any decisions as to the timing, method, or procedures used to terminate a pregnancy; and

(j) Individuals engaged in the research will have no part in determining the viability of a neonate

§46.205 Research involving neonates.

(a) Neonates of uncertain viability and nonviable neonates may be involved in research if all of the following conditions are met:

(1) Where scientifically appropriate, preclinical and clinical studies have been conducted and provide data for assessing potential risks to neonates.

(2) Each individual providing consent under paragraph (b)(2) or (c)(5) of this section is fully informed regarding the reasonably foreseeable impact of the research on the neonate.

(3) Individuals engaged in the research will have no part in determining the viability of a neonate.

(4) The requirements of paragraph (b) or (c) of this section have been met as applicable.

(b)Neonates of uncertain viability. Until it has been ascertained whether or not a neonate is viable, a neonate may not be involved in research covered by this subpart unless the following additional conditions have been met:

(1) The IRB determines that:

(i) The research holds out the prospect of enhancing the probability of survival of the neonate to the point of viability, and any risk is the least possible for achieving that objective, or

(ii) The purpose of the research is the development of important biomedical knowledge which cannot be obtained by other means and there will be no added risk to the neonate resulting from the research; and

(2) The legally effective informed consent of either parent of the neonate or, if neither parent is able to consent because of unavailability, incompetence, or temporary incapacity, the legally effective informed consent of either parent's legally authorized representative is obtained in accord with subpart A of this part, except that the consent of the father or his legally authorized representative need not be obtained if the pregnancy resulted from rape or incest.

(c) Nonviable neonates. After delivery nonviable neonate may not be involved in research covered by this subpart unless all of the following additional conditions are met:

(1) Vital functions of the neonate will not be artificially maintained;

(2) The research will not terminate the heartbeat or respiration of the neonate;

(3) There will be no added risk to the neonate resulting from the research;

(4) The purpose of the research is the development of important biomedical knowledge that cannot be obtained by other means; and

(5) The legally effective informed consent of both parents of the neonate is obtained in accord with subpart A of this part, except that the waiver and alteration provisions of Sec. 46.116(c) and (d) do not apply. However, if either parent is unable to consent because of unavailability, incompetence, or

temporary incapacity, the informed consent of one parent of a nonviable neonate will suffice to meet the requirements of this paragraph (c)(5), except that the consent of the father need not be obtained if the pregnancy resulted from rape or incest. The consent of a legally authorized representative of either or both of the parents of a nonviable neonate will not suffice to meet the requirements of this paragraph (c)(5).

(d) Viable neonates. A neonate, after delivery, that has been determined to be viable may be included in research only to the extent permitted by and in accord with the requirements of subparts A and D of this part.

§46.206 Research involving, after delivery, the placenta, the dead fetus or fetal material.

(a) Research involving, after delivery, the placenta; the dead fetus; macerated fetal material; or cells, tissue, or organs excised from a dead fetus, shall be conducted only in accord with any applicable Federal, State, or local laws and regulations regarding such activities.

(b) If information associated with material described in paragraph (a) of this section is recorded for research purposes in a manner that living individuals can be identified, directly or through identifiers linked to those individuals, those individuals are research subjects and all pertinent subparts of this part are applicable.

§46.207 Research not otherwise approvable which presents an opportunity to understand, prevent, or alleviate a serious problem affecting the health or welfare of pregnant women, fetuses, or neonates.

The Secretary will conduct or fund research that the IRB does not believe meets the requirements of Sec. 46.204 or Sec. 46.205 only if:

(a) The IRB finds that the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of pregnant women, fetuses or neonates; and

(b) The Secretary, after consultation with a panel of experts in pertinent disciplines (for example: science, medicine, ethics, law) and following opportunity for public review and comment, including a public meeting announced in the Federal Register, has determined either:

(1) That the research in fact satisfies the conditions of Sec. 46.204, as applicable; or

(2) The following:

(i) The research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of pregnant women, fetuses or neonates;

(ii) The research will be conducted in accord with sound ethical principles; and

(iii) Informed consent will be obtained in accord with the informed consent provisions of subpart A and other applicable subparts of this part.

Subpart C	Additional DHHS Protections Pertaining to Biomedical and Behavioral Research Involving Prisoners as Subjects
	Source: 43 FR 53655, Nov. 16, 1978.

§46.301 Applicability.

(a) The regulations in this subpart are applicable to all biomedical and behavioral research conducted or supported by the Department of Health and Human Services involving prisoners as subjects.

(b) Nothing in this subpart shall be construed as indicating that compliance with the procedures set forth herein will authorize research involving prisoners as subjects, to the extent such research is limited or barred by applicable State or local law.

(c) The requirements of this subpart are in addition to those imposed under the other subparts of this part.

§46.302 Purpose.

Inasmuch as prisoners may be under constraints because of their incarceration which could affect their ability to make a truly voluntary and uncoerced decision whether or not to participate as subjects in research, it is the purpose of this subpart to provide additional safeguards for the protection of prisoners involved in activities to which this subpart is applicable.

§46.303 Definitions.

As used in this subpart:

(a) "Secretary" means the Secretary of Health and Human Services and any other officer or employee of the Department of Health and Human Services to whom authority has been delegated.

(b) "DHHS" means the Department of Health and Human Services.

(c) "Prisoner" means any individual involuntarily confined or detained in a penal institution. The term is intended to encompass individuals sentenced to such an institution under a criminal or civil statute, individuals detained in other facilities by virtue of statutes or commitment procedures which providealternatives to criminal prosecution or incarceration in a penal institution, and individuals detained pending arraignment, trial, or sentencing.

(d) "Minimal risk" is the probability and magnitude of physical or psychological harm that is normally encountered in the daily lives, or in the routine medical, dental, or psychological examination of healthy persons.

§46.304 Composition of Institutional Review Boards where prisoners are involved.

In addition to satisfying the requirements in §46.107 of this part, an Institutional Review Board, carrying out responsibilities under this part with respect to research covered by this subpart, shall also meet the following specific requirements:

(a) A majority of the Board (exclusive of prisoner members) shall have no association with the prison(s) involved, apart from their membership on the Board.

(b) At least one member of the Board shall be a prisoner, or a prisoner representative with appropriate background and experience to serve in that capacity, except that where a particular research project is reviewed by more than one Board only one Board need satisfy this requirement.

§46.305 Additional duties of the Institutional Review Boards where prisoners are involved.

(a) In addition to all other responsibilities prescribed for Institutional Review Boards under this part, the Board shall review research covered by this subpart and approve such research only if it finds that:

(1) the research under review represents one of the categories of research permissible under §46.306(a)(2);

(2) any possible advantages accruing to the prisoner through his or her participation in the research, when compared to the general living conditions, medical care, quality of food, amenities and opportunity for earnings in the prison, are not of such a magnitude that his or her ability to weigh the risks of the research against the value of such advantages in the limited choice environment of the prison is impaired;

(3) the risks involved in the research are commensurate with risks that would be accepted by nonprisoner volunteers;

(4) procedures for the selection of subjects within the prison are fair to all prisoners and immune from arbitrary intervention by prison authorities or prisoners. Unless the principal investigator provides to the Board justification in writing for following some other procedures, control subjects must be selected randomly from the group of available prisoners who meet the characteristics needed for that particular research project;

(5) the information is presented in language which is understandable to the subject population;

(6) adequate assurance exists that parole boards will not take into account a prisoner's participation in the research in making decisions regarding parole, and each prisoner is clearly informed in advance that participation in the research will have no effect on his or her parole; and

(7) where the Board finds there may be a need for follow-up examination or care of participants after the end of their participation, adequate provision has been made for such examination or care, taking into account the varying lengths of individual prisoners' sentences, and for informing participants of this fact.

(b) The Board shall carry out such other duties as may be assigned by the Secretary.

(c) The institution shall certify to the Secretary, in such form and manner as the Secretary may require, that the duties of the Board under this section have been fulfilled.

§46.306 Permitted research involving prisoners.

(a) Biomedical or behavioral research conducted or supported by DHHS may involve prisoners as subjects only if:

(1) the institution responsible for the conduct of the research has certified to the Secretary that the Institutional Review Board has approved the research under §46.305 of this subpart; and

(2) in the judgment of the Secretary the proposed research involves solely the following:

(A) study of the possible causes, effects, and processes of incarceration, and of criminal behavior, provided that the study presents no more than minimal risk and no more than inconvenience to the subjects;

(B) study of prisons as institutional structures or of prisoners asincarcerated persons, provided that the study presents no more than minimal risk and no more than inconvenience to the subjects;

(C) research on conditions particularly affecting prisoners as a class (for example, vaccine trials and other research on hepatitis which is much more prevalent in prisons than elsewhere; and research on social and psychological problems such as alcoholism, drug addiction, and sexual assaults) provided that the study may proceed only after the Secretary has consulted with appropriate experts including experts in penology, medicine, and ethics, and published notice, in the **Federal Register**, of his intent to approve such research; or

(D) research on practices, both innovative and accepted, which have the intent and reasonable probability of improving the health or well-being of the subject. In cases in which those studies require the assignment of prisoners in a manner consistent with protocols approved by the IRB to control groups which may not benefit from the research, the study may proceed only after the Secretary has consulted with appropriate experts, including experts in penology, medicine, and ethics, and published notice, in the **Federal Register**, of the intent to approve such research.

(b) Except as provided in paragraph (a) of this section, biomedical or behavioral research conducted or supported by DHHS shall not involve prisoners as subjects.

Subpart D	**Additional DHHS Protections for Children Involved as Subjects in Research**
	Source: 48 FR 9818, March 8, 1983; 56 FR 28032, June 18, 1991.

§46.401 To what do these regulations apply?

(a) This subpart applies to all research involving children as subjects, conducted or supported by the Department of Health and Human Services.

(1) This includes research conducted by Department employees, except that each head of an Operating Division of the Department may adopt such nonsubstantive, procedural modifications as may be appropriate from an administrative standpoint.

(2) It also includes research conducted or supported by the Department of Health and Human Services outside the United States, but in appropriate circumstances, the Secretary may, under paragraph (i) of §46.101 of Subpart A, waive the applicability of some or all of the requirements of these regulations for research of this type.

(b) Exemptions at §46.101(b)(1) and (b)(3) through (b)(6) are applicable to this subpart. The exemption at §46.101(b)(2) regarding educational tests is also applicable to this subpart. However, the exemption at §46.101(b)(2) for research involving survey or interview procedures or observations of public behavior does not apply to research covered by this subpart, except for research involving observation of public behavior when the investigator(s) do not participate in the activities being observed.

(c) The exceptions, additions, and provisions for waiver as they appear in paragraphs (c) through (i) of §46.101 of Subpart A are applicable to this subpart.

§46.402 Definitions.

The definitions in §46.102 of Subpart A shall be applicable to this subpart as well. In addition, as used in this subpart:

(a) "Children" are persons who have not attained the legal age for consent to treatments or procedures involved in the research, under the applicable law of the jurisdiction in which the research will be conducted.

(b) "Assent" means a child's affirmative agreement to participate in research. Mere failure to object should not, absent affirmative agreement, be construed as assent.

(c) "Permission" means the agreement of parent(s) or guardian to the participation of their child or ward in research.

(d) "Parent" means a child's biological or adoptive parent.

(e) "Guardian" means an individual who is authorized under applicable State or local law to consent on behalf of a child to general medical care.

§46.403 IRB duties.

In addition to other responsibilities assigned to IRBs under this part, each IRB shall review research covered by this subpart and approve only research which satisfies the conditions of all applicable sections of this subpart.

§46.404 Research not involving greater than minimal risk.

DHHS will conduct or fund research in which the IRB finds that no greater than minimal risk to children is presented, only if the IRB finds that adequate provisions are made for soliciting the assent of the children and the permission of their parents or guardians, as set forth in §46.408.

§46.405 Research involving greater than minimal risk but presenting the prospect of direct benefit to the individual subjects.

DHHS will conduct or fund research in which the IRB finds that more than minimal risk to children is presented by an intervention or procedure that holds out the prospect of direct benefit for the individual subject, or by a monitoring procedure that is likely to contribute to the subject's well-being, only if the IRB finds that:

(a) the risk is justified by the anticipated benefit to the subjects;

(b) the relation of the anticipated benefit to the risk is at least as favorable to the subjects as that presented by available alternative approaches; and

(c) adequate provisions are made for soliciting the assent of the children and permission of their parents or guardians, as set forth in §46.408.

§46.406 Research involving greater than minimal risk and no prospect of direct benefit to individual subjects, but likely to yield generalizable knowledge about the subject's disorder or condition.

DHHS will conduct or fund research in which the IRB finds that more than minimal risk to children is presented by an intervention or procedure that does not hold out the prospect of direct benefit for the individual subject, or by a monitoring procedure which is not likely to contribute to the well-being of the subject, only if the IRB finds that:

(a) the risk represents a minor increase over minimal risk;

(b) the intervention or procedure presents experiences to subjects that are reasonably commensurate with those inherent in their actual or expected medical, dental, psychological, social, or educational situations;

(c) the intervention or procedure is likely to yield generalizable knowledge about the subjects' disorder or condition which is of vital importance for the understanding or amelioration of the subjects' disorder or condition; and

(d) adequate provisions are made for soliciting assent of the children and permission of their parents or guardians, as set forth in §46.408.

§46.407 Research not otherwise approvable which presents an opportunity to understand, prevent, or alleviate a serious problem affecting the health or welfare of children.

DHHS will conduct or fund research that the IRB does not believe meets the requirements of §46.404, §46.405, or §46.406 only if:

(a) the IRB finds that the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children; and

(b) the Secretary, after consultation with a panel of experts in pertinent disciplines (for example: science, medicine, education, ethics, law) and following opportunity for public review and comment, has determined either:

(1) that the research in fact satisfies the conditions of §46.404, §46.405, or §46.406, as applicable, or

(2) the following:

(i) the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children;

(ii) the research will be conducted in accordance with sound ethical principles;

(iii) adequate provisions are made for soliciting the assent of children and the permission of their parents or guardians, as set forth in §46.408.

§46.408 Requirements for permission by parents or guardians and for assent by children.

(a) In addition to the determinations required under other applicable sections of this subpart, the IRB shall determine that adequate provisions are made for soliciting the assent of the children, when in the judgment of the IRB the children are capable of providing assent. In determining whether children are capable of assenting, the IRB shall take into account the ages, maturity, and psychological state of the children involved. This judgment may be made for all children to be involved in research under a particular protocol, or for each child, as the IRB deems appropriate. If the IRB determines that the capability of some or all of the children is so limited that they cannot reasonably be consulted or that the intervention or procedure involved in the research holds out a prospect of direct benefit that is important to the health or well-being of the children and is available only in the context of the research, the assent of the children is not a necessary condition for proceeding with the research. Even where the IRB determines that the subjects are capable of assenting, the IRB may still waive the assent requirement under circumstances in which consent may be waived in accord with §46.116 of Subpart A.

(b) In addition to the determinations required under other applicable sections of this subpart, the IRB shall determine, in accordance with and to the extent that consent is required by §46.116 of Subpart A, that adequate provisions are made for soliciting the permission of each child's parents or guardian. Where parental permission is to be obtained, the IRB may find that the permission of one parent is sufficient for research to be conducted under §46.404 or §46.405. Where research is covered by §46.406 and §46.407 and permission is to be obtained from parents, both parents must give their permission unless one parent is deceased, unknown, incompetent, or not reasonably available, or when only one parent has legal responsibility for the care and custody of the child.

(c) In addition to the provisions for waiver contained in §46.116 of Subpart A, if the IRB determines that a research protocol is designed for conditions or for a subject population for which parental or guardian permission is not a reasonable requirement to protect the subjects (for example, neglected or abused children), it may waive the consent requirements in Subpart A of this part and paragraph

(b) of this section, provided an appropriate mechanism for protecting the children who will participate as subjects in the research is substituted, and provided further that the waiver is not inconsistent with Federal, State, or local law. The choice of anappropriate mechanism would depend upon the nature and purpose of the activities described in the protocol, the risk and anticipated benefit to the research subjects, and their age, maturity, status, and condition.

(d) Permission by parents or guardians shall be documented in accordance with and to the extent required by §46.117 of Subpart A.

(e) When the IRB determines that assent is required, it shall also determine whether and how assent must be documented.

§46.409 Wards.

(a) Children who are wards of the State or any other agency, institution, or entity can be included in research approved under §46.406 or §46.407 only if such research is:

(1) related to their status as wards; or

(2) conducted in schools, camps, hospitals, institutions, or similar settings in which the majority of children involved as subjects are not wards.

(b) If the research is approved under paragraph (a) of this section, the IRB shall require appointment of an advocate for each child who is a ward, in addition to any other individual acting on behalf of the child as guardian or in loco parentis. One individual may serve as advocate for more than one child. The advocate shall be an individual who has the background and experience to act in, and agrees to act in, the best interests of the child for the duration of the child's participation in the research and who is not associated in any way (except in the role as advocate or member of the IRB) with the research, the investigator(s), or the guardian organization.

Appendix C

IRB for the Protection of Human Subjects
Application for Initial Review Form

Revised July 2005

Southern University - Baton Rouge (SU-BR)

Institution Review Board for the Protection of Human Subjects

Application for Initial Review Form

Direction: The principal investigator(s) seeking to obtain SU-BR IRB approval for a research project must submit three hardcopies of the documents listed below and a diskette with digital copies of requisite documents:

The three hardcopies are to include the SU-BR IRB Application for Initial Review Form, a research proposal (maximum 10 pages) and necessary attachments (e.g., copies of protocols, questionnaires or researcher-created instruments, a research permission or consent form (also assent form if children are involved), and a human participant protections training certificate. The training certificate can be obtained by registering and completing the modules at the National Cancer Institute Human Participant Protections Education for Research Teams Web site - http://cme.cancer.gov/c01/ - and printing and saving as an HTML file the last Web page or certificate.

The diskette should include digital Word files for the SU-BR IRB Initial Application Form, the research proposal and attachments, and research permission or consent form (also assent form if children are involved). The human participant protections training certificate is to be saved on the diskette as an HTML file.

The hardcopies and diskette are to be submitted to the Chairperson of the SU-BR IRB: Sandra C. Brown, DNS, School of Nursing, Southern University - Baton Rouge, Baton Rouge LA 70813; Voice - 225-771-5145; Facsimile - 225-771-2349; E-mail - SandraBrown@SUSON.SUBR.Edu.

Title of Research Project

Title:

Principal Investigator(s)

Name(s): E-mail Adress(es) Mailing Address(es): Telephone Number(s): Fax Number(s) (Optional):
Other Researchers – Names, e-mail addresses, mailing addresses, and telephone numbers:

Principal Investigator's Status (e.g., SU-BR Faculty, SU-BR Staff, SU-BR /Student, or other - describe), Department/Unit, University or Agency

Status:
Department/Unit:
University or Agency:

Source of Funding and Contact Person

Is this research project funded by a grant or sponsor (Yes or No)?

If "Yes," provide the information below for the federal or state agency (or sponsor) and contact person:

Funding Agency or Sponsor:
Title of Grant or Contract:
Grant or Contract Number:
Contact Person – name, address, telephone number, e-mail address:

Other IRB(s) that will Approve this Research Project

Will this research project be submitted for approval to another IRB (Yes or No)?

If "Yes," identify the IRB or IRB(s):

General Purpose of the Research Project

Describe the general purpose of the research project:

Subjects/Participants for the Research Project (Place X in appropriate area)

Place X	Subjects/Participants are:	Place X	Subjects/Participants are:
	1 - SU-BR Faculty/Staff/Students		9 – Non-English Speaking
	2 – Minors (If the minors are incarcerated/detained, check 14 - Other below - and identify these individuals)		10 – Exclusion of Minorities
	3 – Adults (Non Elderly – also see 5, 6, 7, 8, 9, 10, 12, 13, 14-Other)		11 - Fetuses
	4 – Elderly		12 – Terminally Ill
	5 – Pregnant Teens and/or Pregnant Women		13 - Comatose
	6 – Cognitively impaired		14 – Other Describe Below
	7 – Institutional Residents		
	8 – Prisoners or Parolees		

Other Subjects/Participants – Describe:

Additional Accessible Population and Subject/Participant Information

Accessible Population for Research Project – Describe and give the number: Subjects/Participants for Research Project - Describe if different from accessible population and give number of subjects/participants for study: Describe how the subjects/participants will be recruited or selected to ensure an equitable and unbiased representation from the accessible population. For example, if selection is random, what specific procedure will be used (e.g., simple, stratified, systematic)? If selection is not random, what procedure is used and how does this procedure provide a representative, unbiased sample from the accessible population: Identify the power analysis used to determine the number of subjects/participants needed for the study based on the size of the accessible population. If a power analysis was not used, describe how the sample size is appropriate for statistical purposes and generalizing of results: Identify individuals who will be excluded from the study and provide the rationale for this exclusion:

Type of Research (Place X in the appropriate area)

Place X	The research involves:	Place X	The research involves:
	1- Interview (Oral or digital)		9 - Clinical HIV/AIDS
	2 – Survey/Questionnaire		10 - Clinical Studies
	3 – Behavioral Observation		11 - Investigational Drugs
	4 – Intervention/Experiment		12 - Investigational Devices
	5 – Deception		13 - Radiation
	6 – Existing Data (e.g., files, databases, etc.)		14 - Controlled Substances
	7 – Human Biological Specimen(s)		15 - Development of Commercial Product from Human Biological Material
	8 – Venipuncture		16 - Genetic Research
17 - Other (Explain) -			

Research Setting and Video/Audio Recording

Setting for Study: Video and/or audio recording to be used during the study and why:

Possible Risks or Discomforts to Subjects/Participants

Expected or possible risks/discomforts during the study:

General and Specific Subject/Participant Benefits

Expected general benefits from study and finding(s): Specific benefits subjects will receive by participating in the study:

Alternative Course(s) of Treatment to what is Proposed

Alternative treatment(s) or procedure(s) that could be used to conduct the study:

Available Medical Treatment for Adverse Experiences - Greater than Minimal Risk

Available medical treatment for subjects/participants:

System and Extent of Confidentiality and Anonymity

Describe in detail the procedure(s) to be used to ensure confidentiality and anonymity for subjects/participants:

Basic and Additional Elements of Consent You have in Your Research Permission Form or Consent Form (Place X in appropriate area)

Place X	Basic and Additional Consent Elements
	1 - Provided title of research.
	2 - Delineated name(s), address(es), telephone number(s), and e-mail address(es) of principal investigator(s)/researcher(s).
	3 - Stated purpose of the research study and described procedures to be used.
	4 - Described possible risks or discomforts.
	5 - Described possible benefits to subjects/participants or others.
	6 - Disclosed available alternative courses of treatment(s) or procedure(s).
	7 - Described available medical treatment for adverse experiences (greater than minimal risk).
	8 - Described the extent of confidentiality and anonymity for subjects/participants.

	9 - Whom to contact about the research—Include the following statements: For additional information about this research study contact –name(s), address(es), and telephone number(s) of principal investigator(s). If you have questions or concerns about your rights as a participant in this research study or to report a research-related injury contact Jimmy D. Lindsey, Ph.D., Chairperson, Institutional Research Oversight Committee, P. O. Box 11241, Southern University -Baton Rouge, Baton Rouge, LA 70813-1241; Voice - 225-771-3950; Facsimile – 225-7715652; E-mail - Jimmy_Lindsey@CXS.SUBR.Edu.
	10 - Stated the following: Participation is voluntary; refusal to participate involves no penalty or loss of benefits that the subject is otherwise entitled; Subjects may discontinue participation without penalty or loss of benefits that the subjects are otherwise entitled.
	11 - Stated the procedure may involve currently unforeseeable risks to the subjects or fetuses, if the subjects become pregnant.
	12 - Described anticipated circumstances under which subject participation may be terminated by the principal investigator(s) without regard to the subject's consent.
	13 - Disclosed additional cost to subjects as a result of participation in the study.
	14 - Described circumstances under which subjects can withdraw from the study and procedures for orderly termination.
	15 – Stated that significant new findings that may relate to subjects' willingness to continue participation in the study will be disclosed to the subjects.
	16 - Stated the possible number of subjects involved in the study.
	17- Stated subjects will receive a signed copy of the consent form.

If you indicated above that you are not including Basic or Additional Consent Elements in your Research Permission Form or Consent Form, identify the element(s) by number(s) and provide the rationale(s) for a request for waiving the element(s).

Element Number	Rational for Waiver Request

Research Project Involving the Obtaining and Use of Health Information and the Health Insurance Portability and Accountability Act (HIPAA) of 1996

Does your research project involve the obtaining and use of health information (Yes or No)?

If "Yes," you are to include in your research permission or consent form the following statement:

A federal regulation known as the Privacy Rule gives you certain rights concerning the privacy of your health information. The Privacy Rule was issued under a law called the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Researchers covered by this regulation are required to get your authorization (permission) to use and disclose (share with others) any health related information that could identify you.

If you sign this consent form, you are giving permission for the use and disclosure of your health information for the purposes of this research study. You do not have to give this permission. However, if you do not, you will not be able to participate in this study.

Instrument Validity and Reliability Data

Did you include in your proposal the validity and reliability data for all instruments to be used to generate data (Yes or No)?

If "No," provide the validity and reliability data for the instruments here:

Descriptive and Inferential Statistics

Did you describe in your proposal the descriptive and inferential statistics (and related assumptions) to be used to analyze the data collected in this research project (Yes or No)?

If "No," describe both the descriptive and inferential statistics to be used and the assumptions you will meet to use the inferential statistics:

Conflict of Interest Declaration: All items must be addressed, and YES responses must be described or explained

1. Will the proposed research result in a patent, trademark, copyright, or licensing agreement (Yes or No)?

1a. If "Yes," describe or explain the patent, trademark, copyright, or licensing agreement.

2. Have you, research project personnel, or your department or agency entered into or expect to enter into any financial agreement with the sponsor of the research (Yes or No)?

2a. If “Yes,” describe or explain the financial agreement(s).
3. Is funding from the sponsor of this research project dependent upon the number of subjects/participants enrolled or the findings of the research (Yes or No)? 3a. If “Yes,” describe or explain the funding arrangement(s).
4. Is there any other conflict(s) of interest that could result from the proposed research (Yes or No)? 4a. If “Yes,” describe or explain the conflict(s) of interest.

Principal Investigator’s Assurance

I, the principal investigator, assure that the information presented in this application is complete and correct, and I will abide by all SU-BR and federal policies and procedures involving the use of human subjects/participants in research and Louisiana legal statutes. As principal investigator, I also understand that I am responsible for conducting the study, ensuring the ethical recruitment-selection-treatment of subjects/participants, securing a new SU-BR IRB review for changes in protocols or procedures, notifying the Chairperson of the SU-BR IRB for the Protection of Human Subjects immediately if research-related injuries or illnesses occur, and submitting to the Chairperson of the SU-BR IRB for the Protection of Human Subjects the required review or summary report when the study is completed or within one year (12 months) if the study is not completed.

_____ _____

Signature of Principal Investigator Date

If the Principal Investigator is a Student, Course Instructor or Major Professor/Advisor's assurance

By my signature below (course instructor for class research project or major professor/advisor for capstone/research projects, thesis, or dissertation), I assure that the information presented in this application is complete and correct, and the student is knowledgeable in policies and procedures involved in using human subjects/participants and has been advised to abide by SU-BR and federal research guidelines and Louisiana legal statues. I also agree to meet with the student on a regular basis to monitor the research project and to support the submission of the required review or summary report to the Chairperson of the SU-BR IRB for the Protection of Human Subjects.

If the student's research is a thesis or dissertation, my signature below also affirms that the student's thesis or dissertation prospectus has been approved by his or her thesis or dissertation committee.

_____
Type or Print Name - Course instructor or Major Professor/Advisor

_____
Signature of Course Instructor or Major Professor/Advisor Date

Note: This research proposal will be reviewed following policies and procedures of the SU-BR IRB for the Protection of Human Subjects. SU-BR IRB approval does not signify that the approved proposal conforms to other IRB or research-site requirements or that the proposal documents conform to accepted professional/academic standards for the use of the written language.

Appendix D

Checklist for Consent Form and Templates for Consent and Assent Forms

Southern University - Baton Rouge (SU-BR)
Institution Review Board (IRB) for the Protection of Human Subjects

Checklist for Basic and Additional Elements of Consent in Consent Form

Directions for Researcher(s): Use this checklist to ensure that your consent form has the basic and additional elements of consent.

Yes/ No	Basic and Additional Consent Elements
	1 - Provided Title of Research
	2 - Delineated Name(s), Address(es), Telephone Number of Investigator(s)
	3 - Stated Purpose of the Research Study and Procedures
	4 - Described Possible Risks or Discomforts.
	5 - Described Possible Benefits to Subjects or Others.
	6 - Disclosed Available Alternative Courses of Treatment.
	7 - Described Available Medical Treatment for Adverse Experiences (Greater than Minimal Risk).
	8 - Described the Extent of Confidentiality.
	9 - Whom to Contact about the Research—Include the Following Statements: a) For additional information about this research study contact –name, address, and telephone number of principal investigator. b) If you have questions or concerns about your rights as a subject in this research study or to report a research-related injury contact, Jimmy D. Lindsey, Ph.D., Chairperson, Institutional Research Oversight Committee, Southern University-Baton Rouge, Baton Rouge, LA 70813, 225-771-3950, Jimmy_Lindsey@CXS.SUBR.Edu.
	10 - Stated the Following: Participation is Voluntary; Refusal to Participate Involves no - Penalty or Loss of Benefits that the Subject is Otherwise Entitled; Subjects May Discontinue Participation Without Penalty or Loss of Benefits that the Subjects are Otherwise Entitled.
	11 - Stated the Procedure May Involve Currently Unforeseeable Risks to the Subjects, or Fetuses, if the Subjects Become Pregnant.
	12 - Described Anticipated Circumstances Under Which Participation may be

	Terminated by the Investigator Without Regard to the Subject’s Consent.
	13 - Disclosed Additional Cost to Subjects as a Result of Participation.
	14 - Described Circumstances of a Decision to Withdraw from the Study and Procedures for Orderly Termination.
	15 – Stated that Significant New Findings that May Relate to Subjects' Willingness to Continue Participation will be Disclosed to the Subjects.
	16 - Stated the Possible Number of Subjects Involved in the Study.
	17- Stated Subject will Receive a Signed Copy of the Consent Form.

Comments:

Southern University - Baton Rouge (SU-BR)

Institution Review Board (IRB) for the Protection of Human Subjects

Template for Consent Form for Adults

Directions: Use the information below to develop the consent form for adults. This consent form could be in prose or outline format. The specific consent information that you provide should be reflective of needed basic and additional elements of consent and the purpose of your research and protocols to be used, and it should be presented in appropriate written language (readability). If you have any questions about the development of your consent form, contact the Chairperson of the SU-BR IRB for the Protection of Human Subjects (Sandra C. Brown, DNS. School of Nursing, SU-BR, Baton Rouge LA 70813; Voice 225-771-5145; Facsimile 225-771-2349; E-mail SandraBrown@SUSON.SUBR.Edu).

What is the title of Research Project?
Include title of Research Project

Who is/are the principal investigator(s) or researcher(s)?
First, include the principal Investigator(s)'s name(s), address(es), telephone number(s), and e-mail address(es). Then, include this information for other researcher(s), if applicable.

Where is the study being conducted?
Describe the setting(s) where the study will take place.

What is the purpose of this study?
Describe the general purpose of the study.

Who is eligible to participate in the study? Who is ineligible? How were the subjects/participants selected to ensure equality and eliminate biases?
Describe and give the number of subjects/participants that will be involved in the study. Provide inclusion criteria for the subjects/participants. Identify individuals who will be excluded from the study and provide the rationale for this exclusion. Describe how the subjects/participants will be recruited or selected to ensure an equitable and unbiased representation from the accessible population.

What will the subjects/participants do if they take part in the study?
Describe all protocols/procedures in lay language, using simple terms and short sentences. Provide a lay description of the randomization procedure for assigning to groups, if applicable, and describe the chances of being assigned to any one group.

What are the possible risks and discomforts for participating in the study?

If there are risks or discomforts to participation in the study, describe them in detail.

What are the possible benefits for participating in the study or that could occur from study results?
Describe any direct benefits the subjects/participants will receive for participation. Also, describe any benefits other individuals might receive, if applicable, because of the results of the study.

Are there alternative procedures that can be used to conduct the study? If subjects/participants do not want to take part in the study, are there other choices?
Describe alternatives to participation in the study (e.g., survey research could involve an interview instead of completing a questionnaire). State that subjects/participants have the choice at any time not to participate in the study and can withdraw (quit) without penalty.

If subjects/participants have any questions or problems, whom can you call?
State subjects/participants can contact the principal investigator(s)/researcher(s) if they have any questions or problems. If the principal investigator is a student, state that the subjects/participants can contact the student's major professor or advisor (provide contact information). State or add to the consent form the following information:

If you have questions or concerns about your rights as a research volunteer in this study or you want to report a research-related injury, contact Jimmy D. Lindsey, Ph.D., Chairperson, Institutional Research Oversight Committee, P. O. Box 11241, Southern University -Baton Rouge, Baton Rouge, LA 70813-1241; Voice 225-771-3950; Facsimile 225-7715652; E-mail - Jimmy_Lindsey@CXS.SUBR.Edu.

What subject/participant information will be kept private?
State that every effort will be made to maintain subjects'/participants' anonymity and the confidentiality of their study records. If study findings are to be used for a presentation, report, publication, etc. (contribute to the generalizable knowledge base), also indicate this could happen and state that the private information of the subject/participant, such as your name and other identifying information, will not be included in any presentation, report, or publication.

Can subject/participant participation in the study end early?
State that subjects/participants may withdraw from the study at any time without penalty. Also state that the principal investigator(s)/researcher(s) may terminate the participation of subjects/participants at any time. Describe possible reasons that could result in subjects/participants termination from the study. Also state that the subjects'/participants' failure to complete study procedures or to answer all questions (e.g., on a survey or during an interview) could result in the data not being used in the study.

What charges will the subjects/participants have to pay?
If there are no charges, state "None". If the participant will incur any extra charges beyond those routinely incurred by participants, indicate that those costs must be met by the participant.

What payment will the subjects/participants receive?
If there is no payment, state "None". If the volunteer will be compensated for participating, state: If you agree to take part, we will pay you _____(indicate amount).

If the research involves greater than minimal risk, is medical treatment available for adverse experiences?
Describe available medical treatment for subjects/participants, if applicable.

Does the research involve the collection and use of medical information?
If medical information is collected and used in this study, state the following:

A federal regulation known as the Privacy Rule gives you certain rights concerning the privacy of your health information. The Privacy Rule was issued under a law called the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Researchers covered by this regulation are required to get your authorization (permission) to use and disclose (share with others) any health related information that could identify you. If you sign this consent form, you are giving permission for the use and disclosure of your health information for the purposes of this research study. You do not have to give this permission. However, if you do not, you will not be able to participate in this study. (Include this statement if research project involves the obtaining and use of health information)

What signatures should appear on the consent form?
Signatures of volunteer and person administering informed consent must appear on the same page – see below). Also include the statement below:

The study has been discussed with me and all my questions have been answered. I understand that additional questions regarding the study should be directed to the study researcher(s)/investigator(s). I agree with the terms above and acknowledge that I have been given a copy of the consent form. I understand that I have not waived any of my legal rights by signing this form.

(Include the following statement if the study involves the collection and use of medical information) With my signature, I grant authorization (permission) for the use and disclosure of my health information for the purposes of this research study.

_____ _____
Signature of Volunteer (or mark, if unable to sign) Date

_____ _____
Signature of Person Administering Informed Consent Date

_____ _____
Signature of Principal Investigator/Researcher Date

Will the potential volunteer be able to read the consent form?
(If the potential volunteer is unable to read, the Reader must be 18 years of age or older)

If the study potential volunteers are unable to read the consent form and it is read to them, include the text and signature line below. Because this situation is not known until the recruitment and consent processes, principal investigator(s)/ researcher(s) may want to have two consent forms (one with the statement and signature line below and one without).

The study volunteer has indicated to me that the volunteer is unable to read. I certify that I have read this consent form to the volunteer and explained that by completing the signature line above the volunteer has agreed to participate.

_____ _____
Signature of Reader Date

Southern University - Baton Rouge (SU-BR)

Institution Review Board (IRB) for the Protection of Human Subjects

Template for Consent Form for Parents or Guardians or Legally Authorized Representative (Curator)

Directions: Use the information below to develop the consent form for parents or guardians to give permission for their children or wards to participate in your study. This consent form could be in prose or outline format. The specific consent information that you provide should be reflective of needed basic and additional elements of consent and the purpose of your research and protocols to be used. Also, it should be written using appropriate written language (readability), and the text should be presented from the perspective of the parents/guardians and their children/wards (e.g., "Your child is one of ____ children selected …." – see examples below). If you have any questions about the development of your consent form for parents/guardians, contact the Chairperson of the SU-BR IRB for the Protection of Human Subjects (Sandra C. Brown, DNS. School of Nursing, SU-BR, Baton Rouge LA 70813; Voice 225-771-5145; Facsimile 225-771-2349; E-mail SandraBrown@SUSON.SUBR.Edu).

What is the title of Research Project?
Include title of Research Project

Who is/are the principal investigator(s) or researcher(s)?
First, include the principal Investigator(s)'s name(s), address(es), telephone number(s), and e-mail address(es). Then, include this information for other researcher(s), if applicable.

Where is the study being conducted?
Describe the setting(s) where the study will take place.

What is the purpose of this study?
Describe the general purpose of the study.

Who is eligible to participate in the study? Who is ineligible? How were the subjects/participants selected to ensure equality and eliminate biases?
Describe and give the number of subjects/participants that will be involved in the study. Provide inclusion criteria for the subjects/participants. Identify individuals who will be excluded from the study and provide the rationale for this exclusion. Describe how the subjects/participants will be recruited or selected to ensure an equitable and unbiased representation from the accessible population.

Your child (or ward) is one of _____ children (or wards) selected to participate in this study. S/he was selected because …

What will the subjects/participants do if they take part in the study?
Describe all protocols/procedures in lay language, using simple terms and short sentences. Provide a lay description of the randomization procedure for assigning to groups, if applicable, and describe the chances of being assigned to any one group.

As a participant in this study, your child (or ward) will engage in a number of activities. These activities include … These activities will not require your child (or ward) to …

What are the possible risks and discomforts for participating in the study?
If there are risks or discomforts to participation in the study, describe them in detail.

Your child (or ward) will not experience any risks (injury or harm) by participating in this study. **Or,** By participating in this study, your child (or ward) will experience ….

What are the possible benefits for participating in the study or that could occur from study results?
Describe any direct benefits the subjects/participants will receive for participation. Also, describe any benefits other individuals might receive, if applicable, because of the results of the study.

Your child (or ward) will receive ... for participating in this study. **Or,** You child (or ward) will receive no specific benefits for participating in this study. However, the expected benefits that could result from this study because of your child's (or ward's) participation include …..

Are there alternative procedures that can be used to conduct the study? If subjects/participants do not want to take part in the study, are there other choices?
Describe alternatives to participation in the study (e.g., survey research could involve an interview instead of completing a questionnaire). State that subjects/participants have the choice at any time not to participate in the study and can withdraw (quit) without penalty.

There are no alternative procedures that can be used with your child (or ward) to …..
Or, There is one alternative procedure that can be used with your child in this study. Instead of having your child (or ward) complete a written questionnaire, the researcher could … (interview).

If subjects/participants have any questions or problems, whom can you call?
State subjects/participants can contact the principal investigator(s)/researcher(s) if they have any questions or problems. If the principal investigator is a student, state subjects/participants can contact the student's major professor or advisor (provide contact information). State or add to the consent form the following information:

If you have questions or concerns about your rights, your child's (or ward's) rights as a research volunteer in this study, or you want to report a research-related injury, contact Jimmy D. Lindsey, Ph.D., Chairperson, Institutional Research Oversight Committee, P. O. Box 11241, Southern University -Baton Rouge, Baton Rouge, LA 70813-1241; Voice 225-771-3950; Facsimile 225-7715652; E-mail - Jimmy_Lindsey@CXS.SUBR.Edu.

What subject/participant information will be kept private?
State that every effort will be made to maintain subjects'/participants' anonymity and the confidentiality of their study records. If study findings are to be used for a presentation, report, publication, etc. (contribute to the generalizable knowledge base), also indicate this could happen and state that the private information of the subject/participant, such as your name and other identifying information, will not be included in any presentation, report, or publication.

Your child's (or ward's) data collected during this study will ….. to ensure her/his anonymity and confidentiality. Also, your child's (or ward's) name will not be used in any publications, reports, or presentations that might result from this study and her/his research data will be presented in group form (aggregate).

Can subject/participant participation in the study end early?
State that subjects/participants may withdraw from the study at any time without penalty. Also state that the principal investigator(s)/researcher(s) may terminate the participation of subjects/participants at any time. Describe possible reasons that could result in subjects/participants termination from the study. Also state that the subjects'/participants' failure to complete study procedures or to answer all questions (e.g., on a survey or during an interview) could result in the data not being used in the study.

Your child (or ward) can withdraw from the study at any time without penalty or punishment. The researcher also has the right to terminate your child's (or ward's) participation in the study if ….

What charges will the subjects/participants have to pay?
If there are no charges, state "None". If the participant will incur any extra charges beyond those routinely incurred by participants, indicate that those costs must be met by the parent or guardian of the participant.

What payment will the subjects/participants receive?
If there is no payment, state "None". If the volunteer will be compensated for participating, state: If your child (or ward) agrees to take part, we will pay your child (or ward)_____(indicate amount).

If the research involves greater than minimal risk, is medical treatment available for adverse experiences?
Describe available medical treatment for subjects/participants, if applicable.

Does the research involve the collection and use of medical information?
If medical information is collected and used in this study, state the following:

A federal regulation known as the Privacy Rule gives you certain rights concerning the privacy of your health information. The Privacy Rule was issued under a law called the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Researchers covered by this regulation are required to get your authorization (permission) to use and disclose (share with others) any health related information that could identify you. If you sign this consent form, you are giving permission for the use and disclosure of your health information for the purposes of this research study. You do not have to give this permission. However, if you do not, you will not be able to participate in this study.

Signatures
Signatures of parent/guardian and person administering informed consent must appear on the same page – see below). Also include the statements below:

The study has been discussed with me and all my questions regarding my child's (or ward's) participation have been answered. I understand that additional questions I may have should be directed to the study researcher(s)/investigator(s). I agree with the terms above and acknowledge that my signature below gives consent for my child (or ward) to participate in this study. I also have been given a copy of the consent form. I understand that I have not waived any of my legal rights by signing this form.

(Include the following statement if the study involves the collection and use of medical information) With my signature, I grant authorization (permission) for the use and disclosure of my child's (ward's)health information for the purposes of this research study.

_____ _____
Signature of Parent or Guardian Date

_____ _____
Signature of Person Administering Informed Consent Date

_____ _____
Signature of Principal Investigator/Researcher Date

Will the potential parents or guardians be able to read the consent form?
(If the potential parents or guardians are unable to read, the Reader must be 18 years of age or older)
If the study potential parents or guardians are unable to read the consent form and it is read to them, include the text and signature line below. Because this situation is not know until the recruitment and consent processes, principal investigator(s)/

researcher(s) may want to have two consent forms (one with the statement and signature line below and one without).

The parent or guardian has indicated to me that s/he is unable to read. I certify that I have read this consent form to the parent or guardian and explained that by completing the signature line above s/he has given permission for her/his child to participate in this study.

_____ _____

Signature of Reader Date

Southern University - Baton Rouge (SU-BR)

Institution Review Board (IRB) for the Protection of Human Subjects

Template for Child Assent Form

Directions: Use the information below to develop the assent form for young children participating in your study. This assent form could be in prose or outline format. The specific assent information that you provide should be reflective of needed assent elements, and it should be presented in a "language" appropriate for the age/abilities of the children (i.e., simple terms and short sentences – see examples below). If you have any questions about the development of your assent form, contact the Chairperson of the SU-BR IRB for the Protection of Human Subjects (Sandra C. Brown, DNS. School of Nursing, SU-BR, Baton Rouge LA 70813; Voice 225-771-5145; Facsimile 225-771-2349; E-mail SandraBrown@SUSON.SUBR.Edu).

Researcher and Purpose of the Research

My name is _____, and I am _____. (Give your name. Describe in age-appropriate language – simple terms and short sentences - who you are or what you do). I am doing a study that will _____. **OR,** I am doing a study to (learn about, determine, find, etc.) _____. (Describe in age-appropriate language the purpose of your research)

Number of Children Participating and Research Protocols/Procedures

There will be _____ other children like you who will be in this study. (Give the number of subjects/participants). If you agree to participate, you will be asked to _____. (Describe in age-appropriate language the research protocols/ procedures the children will undertake)

Risks and Benefits

What you will be asked to do in this study should not hurt you or make you feel bad (uncomfortable). **OR,** What you will be asked to do in this study may make you uncomfortable. This uncomfortable feeling _____. (Describe in age-appropriate language the discomforts the children could experience by participating in the research) **OR,** The needle used to take your blood may hurt you and might bruise your arm. (Describe in age-appropriate language any physical, psychological, or other risks – harm or discomfort - that the children may experience by participating in the research that are beyond or greater than what is ordinarily encountered in daily life or during the performance of routine activities)

If you participate in this study, you will receive _____. **OR,** Although you will not be given anything for participating in this study, what you do may help us learn how to help other children like yourself _____. (Describe in age-appropriate language the benefits the children will receive directly and/or other benefits that the study could

produce, e.g., understanding or assisting other children, contributing to the knowledge base, etc.)

Questions about the Research
You can ask questions any time you want to about the study. You can ask them now or ask later. You can talk to your parents about the study and your participation.

Voluntary Participation
You do not have to be in the study – it is up to you or your choice. No one will be mad at you or punish you, if you do not want to do this. If you do not want to be in the study, you just have to tell the researcher(s) or your parents. You can say "Yes" now and change your mind later. If you change your mind later, no one will be mad at you and you will not be punished.

Anonymity and Confidentiality
If you participate in this study, your name will not be _____. (Describe in age-appropriate language what will be done to ensure that the children's names are not used in reports, presentations, publications, etc. and their names will not be associated with their research data).

Signatures
NOTE: Signatures of the children agreeing to participate in the study and person administering the Child Assent Form must appear on the same page (e.g., see format below).

_____
Signature of Child Age Date

_____
Signature of Witness Date

_____
Signature of Person Administering Informed Assent Date

Will the potential volunteers (children) be able to read the consent form? (If the potential volunteer is unable to read, the Reader must be 18 years of age or older).
If the study potential volunteers (children) are unable to read the assent form and it is read to them, include the text and signature line below. Because this situation is not known until the recruitment and consent processes, principal investigator(s)/

researcher(s) may want to have two assent forms (one with the statement and signature line below and one without).

The child indicated to me that s/he is unable to read. I certify that I have read this assent form to the child and explained that by completing the signature line above s/he has assented to participate in this study.

_____ _____

Signature of Reader Date

Appendix E

IRB for the Protection of Human Subjects
Summary/Annual Report Form

Revised August 2004

Southern University – Baton Rouge (SU-BR)
Institutional Review Board (IRB) For the Protection of Human Subjects

Summary or Annual Report for Non-Exempt Research

Directions: Provide the requested information concerning your approved SU-BR IRB research project (typed written – using Xs and appropriate text descriptions). If necessary, attach additional pages to complete responses. Please sign and return this report to Sandra C. Brown, DNS, School of Nursing, Southern University – Baton Rouge, Baton Rouge LA 70813; Voice - 225-771-5145; Facsimile - 225-771-2349; E-mail SandraBrown@SUSON.SUBR.

SU-BR IRB Number:
Date of Approval:
Principal Investigator:
Project Title:

1. Have you completed this SU-BR IRB approved research project?

   Yes ____

   No ____. If no, go to 1.a.

1.a. Summarize the status of this research project. Note: If this research project is to continue, you must request a continuation review.

2. Were there any changes in the category of subjects/participants used in this research project (actual participants or information obtained from files or database)?

   Yes ____. If yes, go to 2.a.

   No ____.

2.a. Describe change(s) that was made.

3. Were there any changes in the recruitment and/or selection of subjects/ participants?

Yes ____. If yes, go to 3.a

No ____.

3.a. Describe change(s) that was made.

4. How many subjects/participants were proposed for this research project?
_____

How many subjects/participants actually participated? _____

5. Were there any changes in the research protocols (e.g., consent form, research procedures, instruments, data collection and analyses, etc.) approved for this project?

Yes ____. If yes, go to 5.a.

No ____ .

5.a. Describe the change(s) that was made.

6. Were there any research-related adverse events (e.g., injuries or illnesses)?

Yes ____. If yes, go to 6.a.

No ____

6.a. What were the adverse events - injuries or illnesses? What steps were taken to address the adverse events - injuries or illnesses? Was the Chairperson of the SU-BR IRB for the Protection of Human Subjects contacted within 24 hours to report the adverse events (injuries or illnesses) and notified of steps taken? If not, why?

_____ _____
Principal Investigator's Signature Date

Appendix F

IRB for the Protection of Human Subjects
Application for Continuation Review Form

Revised April 2005

Southern University - Baton Rouge (SU-BR)
Institution Review Board (IRB) for the Protection of Human Subjects

Application for Continuation Review Form

Direction: Provide the information requested below. Submit three hardcopies (and files on diskette – rich text format) of this Application for Continuation Review Form, the Summary or Annual Report for Non-Exempt Research, research protocols (original and revised if changes are to be made), and Research Permission Form or Consent Form and assent form – if applicable (original and revised if changes are to be made) to the Chairperson of the SU-BR IRB for the Protection of Human Subjects (Sandra C. Brown, DNS, School of Nursing, SU-BR, Baton Rouge LA 70813, Voice 225-771-5145, Facsimile 225-771-2349, E-mail SandraBrown@SUSON.SUBR.Edu).

SU-BR IRB Number:

Title of Project:

Date of Initial Approval:

Date of Last Continuation Review Approval:

Principal Investigator(s)

Name:
Mailing Address:
E-mail Address:
Telephone Number:
Fax Number (optional):

Other Researchers – Name(s), Mailing Address(es), E-mail Address(es), and Telephone Number(s)

Will the continuation of this research project be supported by a grant or contract? Yes ___. No ____.

If "Yes," provide the information below.

Grant, Contract, or Funding Agency:

Grant or Contract Title and Number:

Information for Federal or State Grant or Contract Contact. This is not information for researcher.

Name:
Mailing Address:
E-mail Address:

Telephone Number: Fax Number:

General Purpose of the Continuation Study

Subjects/Participants for Continuation Study [Place an X in the original approved area(s) and C in area(s) to request a change for this continuation year]

Area	**Subjects/Participants are:**	**Area**	**Subjects/Participants are:**
	1 - SU-BR Faculty/Staff/Students		9 – Non-English Speaking
	2 – Minors (If the minors have are incarcerated/detained, check 14 - Other below - and identify these individuals)		10 – Exclusion of Minorities
	3 – Adults (Non Elderly – also see 5, 6, 7, 8, 9, 10, 12, 13, 14-Other)		11 – Fetuses
	4 – Elderly		12 – Terminally Ill
	5 – Pregnant Teens and/or Pregnant Women		13 – Comatose
	6 – Cognitively impaired		14 – Other Describe Below
	7 – Institutional Residents		
	8 – Prisoners or Parolees		
Other Subjects/Participants – Describe:			

Will new subjects/participants or new private information from databases or files be added this coming year? Yes ____. No _____.

If "Yes" above, provide the requested information.

Number of new subjects/participants to be added: Method for selecting new subjects/participants: New database or file information to be added: Method for obtaining new database or file information:

If new subjects/participants or new private information from databases or files will be added, will the original Research Permission or Consent Form (or Assent Form) be used this coming year?
Yes ____. No _____.

If "No" above, describe the changes that will be made to the research permission/ consent or assent form. Note: A copy of the revised Research Permission Form or Consent Form (or Assent Form) must to be submitted with this continuation application.

Revisions to Original Research Permission or Consent Form:

Revisions to Original Assent Form:

Type of Research (Place an X in original approved area[s] and C in area[s] to request a change for this continuation year)

Area	The research involves:	Area	The research involves:
	1- Interview (Oral or digital)		9 - Clinical HIV/AIDS
	2 – Survey/Questionnaire		10 – Clinical Studies
	3 – Behavioral Observation		11 - Investigational Drugs
	4 – Intervention/Experiment		12 - Investigational Devices
	5 – Deception		13 – Radiation
	6 – Existing Data (e.g., files, databases, etc.)		14 - Controlled Substances
	7 – Human Biological Specimen(s)		15 - Development of Commercial Product from Human Biological Material
	8 – Venipuncture		16 – Genetic Research
17 - Other (Explain) -			

Describe in detail below research activities completed this past year.

Describe in detail below research activities to be implemented or completed this coming year.

Will the approved/current protocol(s) be used this coming year (e.g., treatment, instrument[s], data collection, data analysis, anonymity and confidentiality procedures, etc.)? Yes ____. No ____.

If "No" above, describe changes to be made. <u>Note:</u> A copy of the revised protocol(s) must be submitted with this continuation application.

Changes in approved/current protocol(s):

Were there any research-related adverse event(s) this past year (e.g., illnesses, injuries, etc.)? Yes ____. No ____.

If "Yes" above, describe the adverse event(s), resolution(s), and communication(s) with the Chairperson of the SU-BR IRB for the Protection of Human Subjects about the adverse event(s)

Adverse event(s): Resolution(s) of the adverse event(s):

Communication with Chairperson of the SU-BR IRB:

Were any complaints received from subjects/participants or others the past year? Yes ___. No ____.

If "Yes," describe below.

Complaints from subjects/participants: Complaints from others:

Summarize below any recent literature, research findings, or other relevant information, especially information about the purpose, risks, benefits, and procedures, associated with the research to be continued.

Recent literature, findings, or information concerning research focus: Recent literature, findings, or information concerning research risks, benefits, and procedures:

Conflict of Interest Declaration: ALL items must be addressed, and YES responses must be described or explained

1. Will the continuation of the research result in a patent, trademark, copyright, or licensing agreement? **Yes ___. No ____.** 1a. If "**Yes**," describe or explain the patent, trademark, copyright, or licensing agreement.
2. Have you, research project personnel, or your department or agency entered into or expect to enter into any financial agreement with the sponsor of the research for continuation purposes? **Yes ___. No ____.** 2a. If "**Yes**," describe or explain the financial agreement(s).
3. Is continuation funding from the sponsor of this research project dependent upon the number of subjects/participants enrolled or the findings of the research? **Yes ___. No ____.** 3a. If "**Yes**," describe or explain the funding arrangement(s).
4. Is there any other conflict(s) of interest that could result from the continuation of the research? **Yes ___. No ____.** 4a. If "**Yes**," describe or explain the conflict(s) of interest.

Principal Investigator's Assurance

I, the principal investigator, assure that the information presented in this application for continuation approval is complete and correct, and I will abide by all SU-BR and federal policies and procedures involving the use of human subjects/participants in research and Louisiana legal statutes. As principal investigator, I also understand that I am responsible for conducting the study, ensuring the ethical recruitment-selection-treatment of subjects/participants, securing

a new SU-BR IRB review for changes in protocols or procedures, notifying the Chairperson of the SU-BR IRB immediately if research-related injuries or illnesses occur, and submitting to the Chairperson of the SU-BR IRB the required review or summary report when the study is completed or within one year (12 months) if the study is not completed.

_____ _____

Signature of Principal Investigator Date

If the Principal Investigator is a Student, Course Instructor or Major Professor/ Advisor's assurance

By my signature below (course instructor for class research project or major professor/advisor for capstone/research projects, thesis, or dissertation), I assure that the information presented in this application for continuation approval is complete and correct, and the student is knowledgeable in policies and procedures involved in using human subjects/participants and has been advised to abide by SU-BR and federal research guidelines and Louisiana legal statues. I also agree to meet with the student on a regular basis to monitor the research project and to support the submission of the required review or summary report to the Chairperson of the SU-BR IRB for the Protection of Human Subjects.

If the student's research is a thesis or dissertation, my signature below also affirms that the student's thesis or dissertation prospectus has been approved by his or her thesis or dissertation committee.

_____

Name of Course Instructor or Major Professor/Advisor (Type or print)

_____ _____

Signature of Course Instructor or Major Professor/Advisor Date

Note: This request for continuation will be reviewed following policies and procedures of the SU-BR IRB for the Protection of Human Subjects. SU-BR IRB approval for continuation does not signify that the approved proposal conforms to other IRB or research-site requirements or that the proposal documents conform to accepted professional/academic standards for the use of the written language.