

OPRS

From: Training [training@health-research.org]
Sent: Thursday, November 01, 2007 4:35 PM
To: Training
Cc: Kathleen Hurtado; Darcy Spicer; Lydia Qualls; OPRS
Subject: Thank you for attending iSTAR update training
Attachments: IRB update October 2007 - rev2.ppt

Dr. Darcy Spicer and I would like to thank all of you that attended the iSTAR update training at the end of October. Since the handouts were difficult to read if you did not have a magnifying glass, they are attached here for your convenience. If you were unable to attend the session and have any questions about the information presented in the slides, please feel free to call.

Kind regards,

Kathleen Hurtado

Changes to the iStar Forms

Changes to the iStar Forms

- Additional changes required as part of the AAHRPP accreditation process.
- Changes to reduce clarifications.
- Changes to reduce the burden.

Reportable Events

- Biomedical investigators are usually familiar with the concept of adverse events.
- The term unanticipated problems involving risks to subjects or others can be confusing.
- Both are used but they have different meanings and reporting requirements.

Unanticipated Problems Involving Risks To Subjects Or Others

- The Common Rule 45 CFR 46.103(b)(5) ...institutions have written procedures for ensuring prompt reporting to the IRB, appropriate institutional officials, and the department or agency head of any unanticipated problems involving risks to subjects or others.
- FDA Regulations 21 CFR 56.108(b) ...follow written procedures for ensuring prompt reporting to the IRB, appropriate institutional officials, and the Food and Drug Administration of any unanticipated problems involving risks to human subjects or others.

UP defined by OHRP as any incident, experience, or outcome that meets all of the following criteria:

1. Unexpected (in terms of nature, severity, or frequency) given (a) the research procedures that are described in the protocol-related documents, such as the IRB approved research protocol and informed consent document; and (b) the characteristics of the subject population being studied;

UP defined

2. Related or possibly related to participation in the research (in this guidance document, *possibly related means there is a reasonable possibility that the incident, experience, or outcome may have been caused by the procedures involved in the research*); and

UP defined

3. suggests that the research places subjects or others at a greater risk of harm (including physical, psychological, economic, or social harm) than was previously known or recognized

Significance of UP

An incident, experience, or outcome that meets the three criteria above generally will warrant consideration of substantive changes in the research protocol or informed consent process/document or other corrective actions in order to protect the safety, welfare, or rights of subjects or others.

Corrective Actions or Substantive Changes

- Changes to the research protocol initiated by the investigator prior to obtaining IRB approval to eliminate apparent immediate hazards to subjects;
- Modification of inclusion or exclusion criteria to mitigate the newly identified risks;
- Implementation of additional procedures for monitoring subjects;
- Suspension of enrollment of new subjects;
- Suspension of research procedures in currently enrolled subjects;
- Modification of informed consent documents to include a description of newly recognized risks; and
- Provision of additional information about newly recognized risks to previously enrolled subjects.

Revised Reportable Events Screens

1.2. * Submission Type (Select only one):

- Internal Unanticipated Problem or Adverse Event - Initial Report
- Internal Unanticipated Problem or Adverse Event - Follow-up Report
- External Unanticipated Problem or Adverse Event - Initial Report
- External Unanticipated Problem or Adverse Event - Follow-up Report
- Data Safety Monitoring Report
- Protocol Deviation or Error

Revised Internal Screens

2a.1. * Please provide a brief (less than 30 words) summary of the Internal Unanticipated Problem or Adverse Event. Include a description of the AE(s), what was done to treat it, whether the study drug or procedure was interrupted, discontinued, etc. and indicate outcome.

2a.2. * Unexpected Event/Unanticipated Problem (Check all that apply)

- Anticipated event that exceeds the severity or expected frequency as described in the protocol, informed consent, investigator's brochure, package labeling or package inserts.
- The event was not described in the protocol, informed consent, investigator's brochure, package labeling or package inserts.
- The event is not consistent with the expected natural progression of any underlying disease, disorder or condition of the subject and the subject's predisposing risk factor profile for the event.
- The event was expected, consistent with the protocol, informed consent, or investigator's brochure and/or is consistent with the disease, disorder or condition and the subject's predisposing risk factors.

Note: Anticipated events that are due to the participant's underlying medical condition that do not exceed the expected severity or frequency described in the consent and/or protocol, do not need to be submitted.

Revised Internal Screens

2a.3. * Seriousness of the Adverse Event (items 1-6) and/or Harmfulness of the Unanticipated Problem (items 7-8) (Check all that apply)

- Inpatient hospitalization or prolonging of existing hospitalization.
- Any death occurring while the subject is in the study or within 30 days of active participation in the study.
- Life-threatening reaction.
- A persistent or significant disability/incapacity, or a permanent harm or disability, either physical or psychological.
- The event resulted in an inability to carry on normal activities and required medical or surgical intervention.
- Congenital anomaly/birth defect in the offspring of a subject.
- Breach of confidentiality.
- Other event that suggests that the research places subjects or others at a greater risk of harm than was previously known or recognized.
- None of the above apply.

Revised Internal Screens

2a.4. * Is the Adverse Event or Unanticipated Problem Reasonably Related (Definitely, Probably, or Possibly Related) to the study procedures, drug, or device?

Yes No [Clear](#)

2a.5. * Adverse Event occurring more than 30 days after the subject completes active participation in protocol (Check all that apply) (Note: this section does not apply to Unanticipated Problems)

Secondary cancer reasonably related to the protocol.

Birth anomaly reasonably related to the protocol.

Other significant problem reasonably related to the protocol.

None of the above apply.

Revised External Screens

2b. External Unanticipated Problem or Adverse Event

This screen is required if you are submitting an External Unanticipated Problem or Adverse Event (Question 1.2.)

- 2b.1. * Please provide a brief (less than 30 words) summary of the External Unanticipated Problem or Adverse Event. Include a description of the AE(s), what was done to treat it, whether the study drug or procedure was interrupted, discontinued, etc. and indicate outcome. Merely referring reviewer to External AE Report Form is not acceptable)

Revised Internal/External Screens

10. Risk/Benefit Analysis

10.1. In your opinion, is the overall risk-benefit relationship of the research still acceptable in light of this adverse event or unanticipated problem?

Yes No [Clear](#)

13. Currently Enrolled Subjects

13.1. Do currently enrolled subjects need to be informed of this adverse adverse event or unanticipated problem?

Yes No [Clear](#)

Revised Amendment Screens

1.2. * Type of Amendment(s) (check all that apply):

Type

- Editorial
- Drug or Device
- Funding
- Informed Consent and/or Addenda
- Investigator's Brochure / Package Insert
- Number of Subjects
- Procedures
- Protocol (HSC and CHLA only)
- Recruitment Materials
- Risks/Harms
- Study Personnel
- Subject Population
- Subject Reimbursement / Compensation
- Other

2. Editorial

This screen is required if you indicated this amendment involves Editorial changes (Question 1.2.)

- 2. Editorial changes are changes made to wording, spelling or punctuation, usually made in order to correct grammatical or spelling errors. Please describe each of the editorial changes and provide a rationale:**

Guidance



You must make your changes in the body of the main study application by clicking on "Edit Modified Study" in the Amendment workspace.

3. Drug or Device

This screen is required if you indicated this amendment involves Drug or Device changes (Question 1.2.)

3. Please describe each of the drug or device changes and provide a rationale for the change: [Guidance](#)

You must update the information on the main study application (by clicking "Edit Modified Study" from the Amendment workspace). Please remember to revise any other information (e.g. Protocol, Informed Consent) that is affected by this change. It is likely that the protocol (item 4), informed consent (item 29) and risks (items 27 & 28) will require modification.

4. Funding

This screen is required if you indicated this amendment involves changing the Funding Information (Question 1.2.)

4. Please describe any and all changes to the funding of the study, including a rationale for the change: [Guidance](#)



You must make the changes described above in the main study application (by clicking "Edit Modified Study" from the Amendment workspace). Please remember to alter any other information that is affected by this change.

5. Informed Consent and/or Addenda

This screen is required if you indicated this amendment involves Consent Form or Consent Form Addendum changes (Question 1.2.)

5. **Please summarize each change to the Consent Forms, Assent Forms, Information Sheets, Waivers and/or Informed Consent Addenda and provide a rationale for the change:**

Guidance



You must make the changes described above and upload changed documents in the main study application (by clicking "Edit Modified Study" from the Amendment workspace). Changes to consent forms (et al.) may require further changes to the study. For example, if the Informed Consent process has been changed, item 30 must be updated to reflect the new process. Please ensure that all changes necessary are made in the study application.

6. Investigator's Brochure / Package Insert

This screen is required if you indicated this amendment involves Investigator's Brochure / Package Insert (Question 1.2.)

Based on your review of this updated or revised Investigator's Brochure / Package Insert:

6.1. Has the risk/benefit ratio for this study changed? Yes No [Clear](#)

6.2. Does the protocol require modification? Yes No [Clear](#)

6.3. Does the informed consent require modification? Yes No [Clear](#)

6.4. Do previously enrolled subjects need to be reconsented based on this information?
 Yes No [Clear](#)

6.5. If you checked "Yes" to any of the above questions, please describe:

[Guidance](#)

You must upload the updated document(s) in the correct place in the main study application (by clicking "Edit Modified Study" from the Amendment workspace). If the revisions require changing any other information, including the Protocol or Informed Consent, please revise the requisite information in the main study application. If you selected "yes" to any of the above questions, at a minimum the requisite items (items 27 and 28 for Risks/Harms, 4.2 for the protocol, and 29 and/or 30 for Informed Consent and Addenda) must be altered to reflect the change.

7. Number of Subjects

This screen is required if you indicated this amendment involves changing the Number of Subjects (Question 1.2.)

- 7. Please describe each change to the number of subjects and provide a rationale for the change.**

[Guidance](#)



You must update the information in the main study application (by clicking "Edit Modified Study" from the Amendment workspace). If the revisions require changing any other information, including the Protocol or Informed Consent, please revise that information as well.

8. Procedures

This screen is required if you indicated this amendment involves Procedure changes (Question 1.2.)

8. Please describe each of the changes to the procedures or methods (including any and all Social-Behavioral procedures and Medical procedures) followed in the study and include the rationale for the change:

Guidance



You must make your changes in the body of the main study application by clicking on "Edit Modified Study" in the Amendment workspace. In addition to the changes in the Methods and Procedures sections (items 9, and 12 through 21 inclusive), please remember other likely places of change include the informed consent (items 29 and 30) and protocol (4.2).

9. Protocol

This screen is required if you indicated this amendment involves Protocol changes (Question 1.2.)

9. Please describe each of the changes to the Protocol and provide a rationale for the change:

[Guidance](#)



You must upload the revised Protocol and the sponsor's Summary of Changes (if available) in the main study application (by clicking "Edit Modified Study" from the Amendment workspace). Please remember, if this information requires changing any other information, including the Informed Consent, you must revise the requisite information in the main study application.

10. Recruitment Materials

This screen is required if you indicated this amendment involves changes to Recruitment Materials (Question 1.2.)

10. Please describe each of the changes to the Recruitment Materials and provide a rationale [Guidance](#) for the change:



You must make your changes in the body of the main study application by clicking on "Edit Modified Study" in the Amendment workspace. If the revisions require changing any other information, including the Protocol or Informed Consent, please revise the requisite information in the main study application.

11. Risks/Harms

This screen is required if you indicated this amendment involves changes to the Risk or Harms (Question 1.2.)

11. Please describe each of the changes to the Risks/Harms of the study and provide a rationale for the change:

[Guidance](#)



You must make your changes in the body of the main study application by clicking on "Edit Modified Study" in the Amendment workspace. It is likely that change to the risks and/or harms will require, in addition to updates to items 27 and 28, changes to the Protocol (4.2) and Informed Consent (29).

12. Study Personnel

This screen is required if you indicated this amendment involves changes to the Study Personnel (Question 1.2.)

Please make each of the changes to the previously approved study application here. If any of these changes require other modifications to the study application (consent forms, etc.), you must revise the requisite information in the main study application (by clicking "Edit Modified Study" from the Amendment workspace).

(numbering follows the study application)

2.1. Principal Investigator (PI):

[Guidance](#)

[None] HS Certification: ()

2.2. Study Coordinator or Contact Person:

[Guidance](#)

[None] HS Certification: ()

2.3. Co-Investigators:

[Guidance](#)

Last First Organization

There are no items to display

2.4. Other Study Personnel and their roles:

[Guidance](#)

Last Name First Name Organization Study Role HS Certification Expiration

There are no items to display

2.5. Is the Principal Investigator a student, resident, trainee, or visiting scholar?

[Guidance](#)

Yes No [Clear](#)

2.6. If yes, please designate a Faculty Advisor:

[Guidance](#)

[None] HS Certification: ()

Please note that changing the Principal Investigator will require sign off from the new PI and is likely to require changes to the Protocol (4.2) and Informed Consent documents (29). New Co-Investigators are also required to agree to participate in the study. If new Study Personnel are going to be consenting subjects, please remember indicate so when adding them.

13. Subject Population

This screen is required if you indicated this amendment involves Subject Population changes (Question 1.2.)

13. Please describe each of the changes to the Subject Population and provide a rationale for the change: [Guidance](#)



You must make your changes in the body of the main study application by clicking on "Edit Modified Study" in the Amendment workspace. Inclusion and exclusion criteria must be updated at item 10, and special subject populations are in item 22. If these revisions require changing any other information, including the Protocol or Informed Consent, you must revise that information as well.

14. Subject Reimbursement / Compensation

This screen is required if you indicated this amendment involves changes to Subject Reimbursement or Compensation policies or amounts. (Question 1.2.)

14. **Please describe each of the changes to Subject Reimbursement and/or Compensation and provide a rationale for the change.**
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[Guidance](#)

You must make your changes in the body of the main study application by clicking on "Edit Modified Study" in the Amendment workspace. Please remember to revise any other information effected by this change. It is likely that changes to subject compensation will require updating consent documents (item 29).

15. Other

This screen is required if you indicated this amendment involves other changes not included on the previous screens (Question 1.2.)

15. **Please describe each of the changes you wish to make to the previously approved study and provide a rationale for the change:** [Guidance](#)



You must make your changes in the body of the main study application by clicking on "Edit Modified Study" in the Amendment workspace.

HIPAA Screen Changes

- Reduced information requested.
- Added activities preparatory to research.

35.1. Do you intend to access, use or disclose protected health information (PHI) in order to abstract medical record data (even if you are de-identifying the data abstracted), identify potential participants or to conduct your research?

Yes No [Clear](#)

35.2. If Yes, do you intend to use data that contains any of the 18 elements defined by HIPAA as identifiers (listed below), in your research?

Yes No [Clear](#)

The HIPAA Privacy Rule regulations [45 CFR 164.514(b)] lists 18 specific elements that are considered to be personal identifiers. The list includes:

- Name/Initials
- Street address, city*, county*, precinct*, zip code*, or equivalent geocodes*
- All elements of dates (except year) directly related to an individual (date of birth, admission date, discharge date, date of death)*
- Elements of date, including year, for persons 90 or older
- Telephone number
- Fax number
- Electronic mail address
- Social Security Number
- Medical record number
- Health plan identification number
- Account number
- Certificate/license number
- Vehicle identifiers and serial numbers, including license plate number
- Device identifiers and serial number
- Web addresses (URLs); Internet IP addresses
- Biometric identifiers, including finger and voice print
- Full face photographic images and any comparable images
- Any other unique identifying number, characteristic or code

35.3. Are you only going to obtain data marked with an asterisk (*)? If so, you may be able to obtain or use such health information from a healthcare provider for research purposes without an authorization under the HIPAA privacy rules regarding "limited data sets". If applicable, attach a copy of the signed Data Use Agreement below.

Revised HIPAA Screens

36.1. If you are using or accessing protected health information in order to identify potential participants, indicate whether these activities fall under the rules for Activities Preparatory to Research or whether you will be applying for a Partial Waiver of HIPAA Authorization for the purposes of screening and recruiting.

(CHLA only) Activities Preparatory to Research

Partial Waiver of HIPAA Authorization for screening, recruiting, and identifying subjects

None of the Above

[Clear](#)

36.1.1. (CHLA only) If you have indicated that your access of clinical records (PHI) to identify subjects falls under the classification of Activities Preparatory to Research (36.1 above), please certify the statements below and ensure they are addressed in question 22.1. and sponsors protocol.

By checking the "I Agree" box you are providing assurance to the following:

- The use or disclosure is sought solely to review PHI as necessary to prepare the research protocol or other similar preparatory purposes;
- No PHI will be removed from the covered entity during the review; and
- The PHI that the researcher seeks to use or access is necessary for the research purposes.

I agree to all of the above.

36.2. For study research, please indicate whether you will be obtaining authorization from the subject or requesting a Full Waiver of HIPAA Authorization.

Obtaining HIPAA authorization from subject

Full Waiver of HIPAA Authorization

[Clear](#)

36.2.1. If you are obtaining authorization from the subject, attach the HIPAA authorization forms here (USC Only).

name	Version	Modified
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There are no items to display

HRA Checklist

- A new section 8.4 has been added.
- Staff at HRA will review the iStar application and the contract with the sponsor.
- HRA staff will upload a document indicating that the contract and iStar material are concordant or areas that require attention.

Contract/Study Consistency Checklist

Issue	Agreement/ Contract	Informed Consent	Protocol	Reviewer
<p>A. Confidentiality Describe how data or information will be shared between USC, or sites and the research sponsor.</p>				
<p>B. Research vs. Standard of Care The procedures that will be performed during the course of the trial that are considered to be part of the subjects' routine standard of care and that would be performed anyway notwithstanding the research study are differentiated from the procedures that will be performed during the course of the study that are for research purposes only.</p>				
<p>C. Subjects will be required to bear additional costs beyond those associated with their standard care as a result of participating in the study.</p>				
<p>D. Subject Compensation Subjects will be offered compensation for agreeing to participate in the trial.</p>				
<p>E. Research Related Injury Identify the individual or entity responsible for the costs of any research-related injuries to subjects.</p>				
<p>F. Futures Use Of Data Are subjects asked or expected to donate data, materials, samples etc to databases or tissue repositories and will the sponsor receive any future rights to the data or materials collected in the course of the study?</p>				
<p>G. Study is registered at clinicaltrials.gov</p>				

Questions