

# Summary of Changes Since 08/18/09 Version

# MANUAL FOR HUMAN SUBJECTS

[Research Protections Office](http://www.uvm.edu/irb/)  
245 South Park, Suite 900  
Colchester, Vermont 05446  
Tel: (802) 656-5040 Fax: (802) 656-5041

## Summary of Changes Since 08/09 Version

### 3. CONTACTS

The administrative office of the Committees on Human Research is located in 245 South Park, Suite 900, 656-5040.

Laurel Nolet  
Research Review Administrator/System Specialist  
[Laurel.Nolet@uvm.edu](mailto:Laurel.Nolet@uvm.edu)  
(Safety Subcommittee)

Theodore Marcy, M.D., Chair  
Committee on Human Research in the Behavioral Sciences  
[Theodore.Marcy@vtmednet.org](mailto:Theodore.Marcy@vtmednet.org)

**8.A.1.j.3. Risks/Benefits:** Describe any potential risks. This includes physical, psychological, social, legal or other risks. Describe the planned procedures for protecting against or minimizing potential risks and assess their likely effectiveness. Where appropriate, discuss plans for ensuring necessary medical or professional intervention in the event of adverse effects to the subjects. In studies that involve interventions, describe the plan for data safety and monitoring of the research. Discuss the potential benefits of the research to the subjects and others. Discuss why the risks to the subjects are reasonable in relation to the anticipated benefits to subjects and others. Discuss the importance of the knowledge gained or to be gained as a result of the proposed research and why the risks are reasonable in relation to the knowledge that reasonably may result.

**NOTE:** If the study involves the collection, storage or analysis of genetic information, the [Genetic Information Nondiscrimination Act \(GINA\)](#) is invoked. GINA language must be included in the subject consent form. Language can be found in the IRB consent template located on our forms page.

#### 8.B.1. Consent Requirements/Elements

The [Genetic Information Nondiscrimination Act \(GINA\)](#), generally makes it illegal for health insurance companies, group health plans, and most employers to discriminate based on a person's genetic information. All health insurance companies and group health plans must follow this law by May 21, 2010. All employers with 15 or more employees should have been in compliance with this law as of November 21, 2009.

GINA does not protect persons against genetic discrimination by companies that sell life insurance, disability insurance, or long-term care insurance. GINA also does not prohibit discrimination on the basis of an existing genetic disease or disorder.

Given that GINA has implications regarding the actual or perceived risks of genetic research and an individual's willingness to participate in such research, OHRP Guidance has indicated that investigators and IRBs should be aware of the protections provided by GINA as well as the limitations in the law's scope and effect. They note that IRBs should consider the provisions of GINA when assessing whether genetic research satisfies the criteria required for IRB approval of research, particularly whether the risks are minimized and reasonable in relation to anticipated benefits and whether there are adequate provisions in place to protect the privacy of subjects and maintain the confidentiality of their data. GINA is also relevant to informed consent. When investigators develop, and IRBs review, consent processes and documents for genetic research, they should consider whether and how the protections provided by GINA should be reflected in the consent document's description of risks and provisions for assuring the confidentiality of the data.

If genetic materials are collected, stored or analyzed, GINA language must be included in the subject consent form. Language can be found in the IRB consent template located on our forms page.

### Basic Elements of Informed Consent:

a. 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.

b. A description of any reasonably foreseeable risks (physical, psychological, social, legal, or others) or discomforts to the subject.

**NOTE:** See section 8.A.1.j.3. Risks/Benefits, for additional information regarding GINA.

## 9.B. Adverse Event and Unanticipated Problems Reporting

### 9.B.1. Policies

**a) Federal Policy:** Review of unanticipated problems involving risk to subjects or others (**hereinafter referred to as unanticipated problems**) is required by federal regulations (45CFR46.103 section b (5) and for FDA regulated articles 21 CFR 312 and 21 CFR 812), and is an essential element of the continuing review of research involving human subjects.

## 13.B. UVM/FAHC Researcher as the Lead PI in a Multi-Institutional Study (**completely replaced**)

A completed "Operations Center Activities Supplement" form must be submitted along with the protocol to the UVM/FAHC IRB for review. In addition all participating sites must have a signed agreement, negotiated through UVM's Pre-Award Services, prior to beginning activities.

### **POLICY: Requirements for Conducting Multi-Institutional Studies when UVM/FAHC is the Operations Center (OC) 12/21/09**

#### **Replaces Policy: INSTITUTIONAL REVIEW BOARD (IRB) GUIDELINES FOR MULTI-INSTITUTIONAL STUDIES ORIGINATING AT AND/OR UNDER THE LEADERSHIP OF UVM/FAHC**

This section provides an overview of the processes and oversight an Operations Center should have in place to ensure proper study management of a multicenter clinical trial. These elements must be addressed either in the protocol or in a study operations manual. Deviations from these elements will be reviewed on a case-by-case basis.

#### **Purpose and Function of Operations Center (OC)**

The OC provides administrative, data management, and organizational support in the conduct of the multi-center trial. Follows is a list of responsibilities:

- Central location for all trial documents
- Initial IRB protocol review and approval
- Distribution of approved protocol materials to participating sites
- Process for central subject registration
- Process for submitting adverse events and unanticipated problems to the Primary Principal Investigator and appropriate oversight entities
- Coordinate staff training
- Facilitate monitoring and auditing visits for all participating sites

### **Primary Principal Investigator (PPI) Responsibilities**

The PPI has the responsibility to monitor the progress and safety of the protocol across all participating sites. Follows are a list of responsibilities, some of which may be delegated back to the OC:

- Coordination and development of the protocol, and its subsequent amendments
- Study staff training
- Regulatory reporting requirements
- Timely review of all serious adverse events (SAE) reports from all sites
- Review of all study data submitted for analysis
- Regular communication with all participating sites
- May delegate authority for ongoing trial management

Note: A PPI who holds an IND is bound to the investigator and sponsor requirements written in 21 CFR part 312.

### **Participating Investigator Responsibilities**

PIs are responsible for the conduct of the trial at their individual site. It is the responsibility of the site PI to ensure that his or her study team has the current version of the protocol and informed consent documents and that the study team is conducting the clinical trial within the guidelines of Good Clinical Practice. Additional responsibilities of the PI include:

- Designating a study coordinator and/or research nurse as the study contact
- Timely submission of data
- Prompt reporting of serious adverse events (SAEs) and unanticipated problems involving research to their local IRB and the OC.

### **Regulatory Binder**

Each such must compile a regulatory binder specific to its function. The documents should be maintained or updated, as appropriate, throughout the course of the trial. The OC will identify the required contents.

### **Central Subject Registration**

The OC serves as the central location for registering all subjects enrolled. Subject registration requires a registration checklist and copy of the signed informed consent. The OC will maintain a subject registration list and copies of the above for each participating site.

### **Adverse Event Reporting**

The PPI is responsible for the timely review of all SAE reports to assure the safety of subjects. The OC is the central location for the collection and maintenance of adverse event documentation and promptly submits SAE report to the PPI.

The OC maintains documentation of all adverse events for each site. Each site maintains its own documentation as required.

All adverse events must be reported as outlined in the protocol. Participating sites may need to report adverse events to their own IRB as well as to the OC.

Note: A PPI who is the IND holder is ultimately responsible for reporting to FDA.

### **Data Collection**

The participating sites should submit case report forms (CRFs) to the OC according to the protocol. Sites should be aware that they might need to send source documentation to the OC.

### **Quality Assurance**

The PPI with support from the OC is responsible for the integrity and accuracy of data collected at each participating site. The monitoring and auditing plans should be based on the complexity and risk level of the trial. Typical monitoring and auditing visits may include review of original consent forms, case report forms and source documentation, treatment administration records, protocol compliance, and drug accountability. Sites should be aware that they might be audited by the OC in addition to any oversight

delegated to an external Contract Organization.

Note: The participating site should notify the OC immediately they have been cited for an FDA audit.

**Site Communication**

The PPI and OC should have regular and documented communications with the participating sites to update and inform them about the progress of the trial.

**Drug Ordering**

Each participating site is responsible for the ordering, storing, and dispensing of investigational agent(s) from the sponsor or company that is supporting the trial.

**Inter-Institutional Agreement**

A formal agreement/contract is required for each protocol. The agreement must be reviewed and approved by the OC's Pre-Award Services Office at UVM.

