Human Research Protection Program: 
Guidance, Standard and Practices

Institution Review Board

Office of Sponsored Research and Programs

Approved by CSUDH Institutional Review Board 
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Acknowledgements

This guidebook was modified from the one developed by the SDSU Institutional Review Board members and the staff of the Division of Research Administration and Technology Services, Graduate and Research Affairs to ethical research practices. The standards are based on the ethical principles of The Belmont Report and requirements of the Code of Federal Regulations pertaining to the protection of human research participants (45 CFR 46). The NIH Human Subjects Research Enhancements Award provided support to prepare this document for distribution to institutions within the California State University system.

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1.0 Institutional Review Board (IRB) General Information and Definitions

1.1 Institutional Responsibility

Institutions receiving U.S. Department of Health and Human Services (DHHS) funds to conduct research with human participants must assume responsibility for the protection of the rights and welfare of human subjects in compliance with federal regulations. Each institution is required to document this information within a Federalwide Assurance issued by the U.S. Department of Health and Human Services Office of Human Research Protections. Federalwide assurances state the requirements and procedures for human subjects protections to ensure that all research conducted within its jurisdiction complies with the Code of Federal Regulations pertaining to human subjects (DHHS Policy - 45 CFR 46; FDA Policy 21 CFR 50 and 56). To obtain information about a Federalwide assurance, visit the Office of Human Research Protections Division of Assurances and Quality Improvement (DAQI) website available at: http://www.hhs.gov/ohrp/

1.2 University Administrative Support

Administrative support for the CSUDH Institutional Review Board is provided through the Office of Research and Funded Projects which is housed in the division of Academic Affairs. This office is also responsible for establishing and maintaining a program in support of ethical and responsible human subjects’ research conducted under the auspices of CSUDH. This is accomplished through proactive oversight of approved research (Continuing Review Program), Internet access to relevant resources, ongoing education and training, maintaining archival and reference materials, and periodic assessment of resources dedicated in support of these activities.

1.3 IRB Responsibility

The Institutional Review Board (IRB) implements a review process established within the Code of Federal Regulations to ensure that human subjects’ research complies with federal regulations, institutional policies and ethical standards. The IRB serves to protect the rights and ensure the safety of people involved as participants in research. The IRB also provides assistance to the investigator in complying with federal and state regulations and institutional standards for human subjects’ research. The IRB is guided by the ethical principles as set forth in the Ethical Principles and Guidelines for the Protection of Human Subjects of Research also known as The Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects in Research.

1.4 IRB and Institutional Authority

The IRB may approve research reviewed or may require that modifications to the protocol be made to secure approval to conduct the research. The IRB may also withhold approval. Decisions made by the IRB are communicated in writing to the investigator (45 CFR 46.109). The IRB may also suspend or terminate approval of research that is not conducted in accordance with the approved protocol or that has been associated with unexpected serious harm to subjects (45 CFR 46.113). Actions taken by the IRB to suspend or terminate approval will be documented in writing and reported to the investigator, institutional officials and to the Office for Human Research Protections (OHRP).

Authorized institutional officials may approve or disapprove research planned by an employee, student or agent of the University. The institutional officials may not approve research involving human subjects that has not been approved by the IRB (45 CFR 46.112).
1.5 IRB Jurisdiction

The IRB reviews research when procedures are proposed to obtain information about a living individual through the use of a survey, interview, observation, experimentation, or the analysis of human tissues, records, samples or other data previously collected from human subjects. All research involving human subjects must be reviewed and approved by the Institutional Review Board (IRB) in advance of study initiation.

An IRB review must occur when the institution is engaged in human subjects’ research. For example:

- Institution employees or agents, in connection with their institutional responsibilities, intervene or interact with human subjects for purposes of research or obtain individually identifiable private information about human subjects for purposes of research; or

- The institution receives a direct federal award to conduct human subject research, even where all activities involving human subjects are carried out by a subcontractor or collaborator.

- Research that involves the use of the institution’s non-public information to identify or contact human research subjects or prospective subjects or utilizes any institutional property or facilities in connection with human subjects’ research.

1.6 IRB Membership

1.6.1 IRB Composition

The CSUDH President appoints the IRB members in accordance with federal requirements (45 CFR 46.107). Membership on the board renews automatically every year unless the member requests to terminate their membership on the board. The IRB is composed of members representing the University faculty, staff and local community. Membership includes at least one individual whose primary concerns are in the nonscientific areas and at least one member not otherwise affiliated with the institution and who is not part of the immediate family of a person affiliated with the institution. The faculty members represent a variety of disciplines representative of the research reviewed.

1.6.2 Selection/Appointments

The IRB Chair or IRB Administrator will confirm that IRB membership is in compliance with regulations (46.107). If an additional member(s) is needed, several methods are used to identify candidates. The existing members may be asked to provide recommendations to the Chair. Department Chairs may be contacted to suggest faculty who are available and interested. Faculty who are active in the research community may be contacted directly to discuss service to the committee. The Chair and the Office of Research and Funded Projects staff and administrators forward recommendations to the President. The President makes appointments to the IRB. Reappointment may occur on an annual basis.

1.6.3 Alternate Member

An alternate member may be appointed to the Committee to serve in the absence of a member. The alternate is selected based on the expertise and perspective he/she can bring to the review process. Due to the diversity in an individual’s academic and/or professional training as well as experience, an alternate member is selected to represent an absent member (if needed) using the following criteria: scientist/M.D., scientist/non M.D., nonscientist, or community member (45 CFR 46.107).
1.7 IRB Member Responsibilities

1.7.1 Member Training


1.7.2 Reviewer Expertise (Research Involving Children, Prisoners, etc.)

The IRB membership includes those familiar with the type of research routinely conducted in the social and behavioral sciences. At least one member is a medical professional who can assist with the review of clinical trials and studies that may involve more than minimal risk of physical injury. The IRB recognizes that additional expertise may be necessary when reviewing a protocol (45 CFR 46.107). The IRB may request consultation from an individual with competence in a specific area when issues relevant to a protocol require expertise above or beyond that available on the IRB. Individuals invited to comment due to their expertise may not vote on a motion.

1.7.3 Primary Reviewer Process

At the IRB Chair's discretion, the Primary Reviewer Process may be used, particularly when there are many proposals to consider. The primary reviewer is responsible for presenting an in-depth review of all protocol documents submitted to the IRB members during the scheduled meeting and identifies areas of the research that require elaboration prior to securing approval. A committee member is identified as a primary reviewer based on his or her expertise in the discipline in which the research is taking place as long as he or she does not have a conflicting interest with the study. Assignment as a primary reviewer is indicated on the meeting agenda. This process is used for initial and continuing review as well as proposed protocol modifications not eligible for expedited review.

1.7.4 Documents Reviewed by the IRB

1.7.4.1 Primary Reviewer

The primary reviewer reviews the entire application packet including the protocol, consent documents, grant application (if funded by the Department of Health and Human Services), recruitment materials and other supporting documents (study instruments, letters of support, etc...). If the study is a clinical trial, the primary reviewer will also review the investigator's brochure.

For continuing review conducted during the full committee, the primary reviewer receives a request for continuation of approval along with the consent form(s) and an abstract of the study. The continuation of approval request includes the number of subjects intended for study, the number of subjects accrued, a summary of any significant adverse events or unexpected problems, a summary of protocol revisions approved by the IRB since the last full committee review, current literature that may influence the conduct of the study and an update of financial interests (if applicable). The primary reviewer may also have access to the original protocol.
documents prior to the full meeting. Materials describing proposed protocol modifications are accessible to the primary reviewer as a standard practice.

1.7.4.2 IRB Members

Each IRB member may access the entire initial review application packet including the protocol, consent documents, recruitment materials and other supporting documents (study instruments, letters of support, etc…) and the investigator’s brochure or the grant proposal if applicable.

For continuing review, all members may access the request for continuation of approval along with the consent form(s) and an abstract of the study.

1.8 Subcommittee Procedures

A subcommittee of the IRB is defined as one or more experienced IRB members designated by the IRB Chair or IRB Administrator to act on behalf of the committee when action by the full board is not required (45 CFR 46.110).

1.9 Review of Significant Adverse Events (SAE)

The investigator files an SAE report in a timely manner after the event. The report is forwarded to a member of the IRB for review and comment. The report is forwarded to the full IRB Committee for review.

1.10 Quorum and Voting Requirements (46.107 and 46.108)

To convene a meeting of the IRB, a majority of the voting members of the IRB must be present. The committee may not convene without a member whose primary concerns are nonscientific. If the quorum fails during the meeting (early departures, loss of nonscientist, excused for conflict) the meeting will be terminated until the quorum can be restored. Any action taken without a quorum present is considered invalid.

An alternate member may be assigned to replace a member who is not able to attend the full meeting. The alternate may vote only when in attendance to replace a voting member. Individuals designated as non-voting members may contribute to discussion; however, may not serve as a primary reviewer, propose a motion or vote on a motion. In order for a motion to pass, it must receive the approval of a majority of voting members present at the meeting.

1.11 IRB Member Conflict of Interest

Regulations stipulate that an IRB member may not participate in the initial or continuing review of a project in which the member has a conflicting interest except in response to information requested by the committee (45 CFR 46.107e). If a member has a conflict of interest (personal, professional or financial), he/she will leave the meeting room while discussion and voting occurs. This will be documented on the review documents as well as in the meeting minutes.

1.12 Education Requirement

CSUDH requires all researchers engaged in human subjects’ research to obtain certification of successful completion of an IRB tutorial, such as the one offered by Collaborative Institutional Training Initiative (CITI). This requirement is designed to encourage understanding of values toward responsible conduct in research. The tutorial covers basic ethical principles and practices to apply whenever human subjects are involved in research studies. The content is based on the Code of Federal Regulations that pertain to human subjects (45 CFR 46), Ethical Principles and Guidelines for the
Protection of Human Subjects - known as The Belmont Report, and CSUDH's Federalwide Assurance. By successfully completing the tutorial, the investigator demonstrates the knowledge of human subjects' protections necessary to satisfy this requirement.

2.0 When is a Review Required?

An IRB review is required when a study meets the criteria as defined by the federal regulations as human subjects’ research.

2.1 Definitions

In determining whether or not a project requires review by the IRB, the first step is to determine if the project is research and to then identify whether the people involved are also human subjects. The IRB only reviews activities that involve the participation of human subjects in research. The definitions used by the IRB in determining the need for review follow:

2.1.1 Research

The Department of Health and Human Services (DHHS) Code of Federal Regulations (45 CFR 46.102d) has defined research as, "A systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge." As described in the Belmont Report, "...the term 'research' designates an activity designed to test a 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).

2.1.2 Human Subject

A human subject is defined as "a living individual about whom an investigator (whether professional or student) conducting research obtains (1) data through intervention or interaction, or (2) identifiable private information." (45 CFR 46.102f)

2.1.3 Generalizable Knowledge

The IRB considers generalizable knowledge to include the dissemination of research findings beyond the boundaries of the institution (e.g., publication (including thesis or dissertation) or presentation or use outside the specific instructional setting.) The exception to the parameters defined occurs when a report of findings is issued to an agency that has contracted with the university to acquire programmatic information (e.g., needs assessment, program evaluation, quality control).

For more human subjects research-related definitions, please visit the Office for Human Research Protections (OHRP) website: [LINK] http://www.hhs.gov/ohrp/.

2.2 When is IRB Review Required?

IRB review is required when the institution is engaged in human subjects’ research. This occurs when an agent or employee of the institution:

• Intervenes with a living individual for research purposes (e.g., to draw/collect blood or other biological samples, dispense drugs, administer treatments, use physical sensors, test sensory acuity, collect information by survey, interview oral history).
• Manipulates an individual's environment for research purposes (control environmental light, sound, temperature, social interactions).

• Interacts with an individual for research purposes (obtain consent, conduct interviews, screen potential subjects). Please note: Employees who make information available about a study and/or obtain permission from an individual to release contact information to an investigator but do not consent individuals nor act on behalf of the investigator are not engaged in research.

• Releases individually identifiable private information or allows an investigator to obtain an individual’s private information without the individuals' written consent (release of patient’s name to investigators for recruitment, allowing access to an individual's academic or medical record).

• Obtains, receives or possesses private information that is individually identifiable (with or without coding system) for research purposes.

• Obtains, receives or possesses individually identifiable private information for use in maintaining a statistical center for a multi-site research program

• Receives a direct HHS award to conduct human subjects’ research that will be carried out by a subcontractor or collaborator.

2.3 More Information on When IRB Review is Necessary

2.3.1 Institutional Sponsored Research

Regardless of where the research activity will occur, the IRB is required to review all research involving human subjects that is sponsored by the institution or its ancillaries.

2.3.2 Institutional Involvement

All research projects that involve human subjects conducted by or under the direction of any employee, student, or agent of the institution in connection with his or her institutional responsibilities or that utilizes any property or facility of this institution, whether funded or not funded, are subject to the federal regulations governing such research (see 45 CFR 46 and The Belmont Report), and to the policies and procedures outlined in the Institution’s Assurance of Compliance. IRB review and approval must occur in advance of study initiation.

2.3.3 Collaborative Research

Research with human subjects conducted in collaboration with other universities, research institutions, or hospitals must be reviewed and approved by the IRB when the research is conducted by or under the direction of the institution’s employee, student or agent. Studies in which the duties of the principal investigator are formally contracted to a non-institutional performance site must obtain approval from an IRB designated for that institution in addition to review requirements imposed by the institution’s IRB.

Under 45 CFR 46.114 and 21 CFR 56.114, institutions engaged in research projects involving more than one institution may enter into joint review arrangements or rely on the review of one on the institutions’ IRBs.

Therefore the CSUDH IRB can honor the IRB approval from other institutions who have a Federalwide assurance with the OHRP. Other institutions can rely on our IRB as well. This assurance certifies that the institution commits to the HHS that it will comply with the requirements in the HHS protection of human subjects’ regulation at 45 CFR part 46. For expedited and full board studies a collaborative agreement or IRB Authorization
Agreement must be signed by both institutions. This document states CSUDH will rely on the IRB approval of another institution.

2.3.4 Consultant

The IRB is required to review all human subject research conducted by or under the direction of an agent of the institution unless the researcher is hired on his/her own time, does not utilize the institution’s resources, and will not reference the institution in documents or publications associated with any reported outcomes.

2.3.5 Students Enrolled in a Joint Doctoral Program

The IRB is required to review all human subject research conducted by or under the direction of an institution’s employee, student or agent performing research related activities as part of their responsibilities at the institution. The requirement to obtain approval from the IRB is in addition to review requirements imposed by the other institution with which the investigator is affiliated. This will apply primarily to students who are fulfilling degree requirements for a doctoral degree and who are enrolled in two academic institutions.

2.3.6 Research in Foreign Countries

Research conducted in a foreign country by or under the direction of a researcher affiliated with the institution must be approved by the IRB and adhere to University and federal/state guidelines. The standards for ethical conduct in research must be incorporated into the research design. Any proposed variations to ethical practices endorsed by the institution and federal regulations (recruitment procedures, consent process, confidentiality practices) that result from cultural, political or social issues unique to the country in which the research will occur must be supported by the investigator within the protocol submitted for review. An Institutional Review Board or Ethics Committee familiar with the locale in which the research will be conducted may also be required to conduct a review and provide approval.

2.3.7 Pilot Studies

Studies that meet the definition of research that involve human subjects must receive IRB review and approval prior to initiation. Pilot or feasibility studies may include as few as one person must adhere to the same federal, state and institutional requirements to protect human subjects in research regardless of the number of subjects involved.

2.3.8 Secondary or Existing Data Analysis

Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, must be reviewed by the IRB. It is likely that this type of research will meet the criteria for exemption and can be verified through an administrative review (45 CFR 46.101). Please note: All data included in the request to analyze existing data must exist at the time the research is proposed. This category does not apply to prospective collection of materials.

2.3.9 Nonaffiliated Investigator

Persons not affiliated with the institution that plan to conduct human subject research that involves the use of institutional facilities, employees, and/or students must obtain a campus sponsor from a designated institutional department prior to submitting an application to the IRB. An affiliated employee (faculty or administrator) with sufficient expertise in the research area to provide limited oversight of the project may act as the campus sponsor. The campus sponsor must review the protocol prior to agreeing to serve as the campus sponsor and sign the application before it is submitted to the IRB to ensure
ethical principles are implemented when conducting research. Responsibility for the actual conduct of the research remains solely with the unaffiliated investigator.

2.3.10 Access of the Institution’s Non-public Information

Research that involves the use of the institution’s non-public information to identify or contact human research subjects or prospective subjects must be approved by the IRB in advance of initiating the research.

2.4 When is IRB Review Not Required?

The institution is not engaged in research when an employee or agent of the institution:

• Consults on research but at no time obtains, receives, or possesses identifiable private information (e.g., a consultant analyzes data that cannot be linked to individual subjects, either directly or indirectly through coding systems, by any member of the research team).

• Performs commercial services for the investigators (or performs other genuinely non-collaborative services meriting neither professional recognition nor publication privileges), and adheres to commonly recognized professional standards for maintaining privacy and confidentiality (e.g., an appropriately qualified laboratory performs analyses of blood samples for investigators solely on a commercial basis).

• Releases anonymous (no codes, links or identifiers) individual information or specimens to an investigator.

• Releases identifiable private information to a State or Local Health Department for public health purposes (no research component to the activity).

• Releases private identifiable information to an investigator when written permission of the subject has been obtained and is documented.

2.5 More Information on when IRB Review May Not be Necessary

IRB review may not be required in the following situations:

2.5.1 Program Evaluation, Needs Assessment and Quality Control

Studies conducted for the purpose of program evaluation, needs assessment, or quality control in which findings are solely intended for use in internal program planning and development and are not designed to contribute to generalizable knowledge (publication or presentation) are not subject to IRB review.

2.5.2 Consultation

Projects are not subject to IRB review when an employee of the institution consults on research but does not receive or possess identifiable and private information about persons participating in the study.

In addition, projects are not subject to IRB review when an employee of the institution is engaged in research as a consultant through a non-institutional contract. In this case, research activities must occur outside of his/her institutional employment and he/she may not reference the institution in documents or publications associated with any reported outcomes.
2.5.3 Research Methods Courses/Class Assignments

The primary purpose of providing training in research methods is for the student to become more knowledgeable about the research process. Instructors may assign a project, in conjunction with the course, in which students design a study, recruit participants, collect and analyze data and report their findings in the form of a final paper. Since the intent of the project/assignment is to train students, the assignment is not considered to be research as defined within the federal regulations and is not subject to IRB review. The course instructor is responsible for including information about ethical research practices and providing direct supervision of each project. Projects conducted for this purpose should not exceed minimal risk, or target special populations or include sensitive subject matter. However, if a class project concerns any of the following it needs to be reviewed by the IRB: (a) exceeds minimal risk, (b) uses special populations, (c) includes sensitive information, or (d) is expected to be published or presented in a public forum.

If the course assignment produces results that may be of interest to the scientific community, the IRB recommends that the student replicate the study under an IRB-approved protocol. The IRB does not have the authority to approve research retrospectively. If the primary intention of the student and faculty supervisor is to publish the data collected from the student's class project, then IRB approval is needed prior to commencement of recruitment and data collection. (See CSULB's 4000 Instructional Demonstrations and Activities for revision of this section.) "Faculty members often give instructional demonstrations or conduct other activities in a classroom setting that involve the use of human subjects; typically students in the class. The responsibility for proper conduct of such instructional demonstrations or activities is borne by the individual faculty member and is not subject to review by the IRB. The instructor shall be aware of any potential risks to the dignity, rights, or welfare of the subjects; make those risks known to the potential subjects, and (if more than minimal risk is involved) inform the subjects of their rights as embodied in this document. The responsibility for informing students of the potential risks in such participatory instructional activities lies with the instructor. Each student shall be informed in writing during the first week of class of any instructor if, in the opinion of the student, the risks appear excessive.

2.5.4 Research Not Involving Human Subjects

Although an activity may be considered research (…systematic investigation designed to contribute to generalizable knowledge…), it may not involve human subjects (…a living individual about whom information is obtained through intervention or interaction). Persons involved in a research activity are not considered to be human subjects when the following apply:

• The information collected is not about the individual. That is, the person interviewed/surveyed is asked to provide information specific to his/her expertise or profession as opposed to personal information about him/herself (opinions, thoughts, or perceptions). For example, a welder asked to describe the composite of shielding gas, shielding gas flow rate, and formation of the weld bead is not disclosing information about him/herself and, as such, is not a research subject. Likewise, an entomologist who describes the varieties of pesticide used to control a specific pest and to identify the types of pesticides that are used most frequently is contributing his/her expertise rather than information about him/herself.

• The person is asked to wear a devise to measure something external to the person (air quality, environmental toxins). No data are collected about the person.

• The information must be about a living individual to qualify as a human subject. Review of death records does not involve human subjects. However, analyses of biologic specimen (blood, tissues) or nonpublic records do require IRB review and approval before analysis may begin.
3.0 Review Process and Procedures

3.1 Review Procedures

The Institutional Review Board (IRB) will review research involving human subjects to assure that the protocol meets with federal, state and institutional regulations. Activity involving human subjects (identification of prospective subjects, recruitment, etc.) may not be initiated until the study has been reviewed and approved by the IRB.

There are three different procedures that are used to review an application (Exempt, Expedited and Full Committee). The appropriate review procedure is determined by federal regulations and applied based on how human subjects are involved in the research. The type of review is based on risk associated with participation in the research, the study intervention/interaction and how informed consent is obtained and documented. A research protocol, informed consent statement (as appropriate) and additional supporting documents are required for all research projects submitted for review.

3.2 Administrative Review

Research that is considered minimal risk and that meets federal criteria for an exempt or expedited review (e.g., use of existing data; some survey or interview procedures) may be eligible for review through administrative procedures (45 CFR 46.101 & 45 CFR 46.110). The research protocol is evaluated to determine whether criteria are met to justify an exempt or expedited review. The IRB or an IRB administrator designated by the IRB will review and verify new protocols that are identified as exempt. Notification of concurrence with the exempt status, including citation of the specific exemption category, will be conveyed in writing or electronically to the investigator. All nonexempt research will be reviewed through the IRB Chair (expedited) or by the full committee. Studies receiving an exempt or expedited review are reviewed on a first come first serve basis and notification is available to investigators approximately two to three weeks following application submission for an administrative review.

3.3.1 Exempt Review

The majority of studies that involve data collection from adults using a survey or interview format are exempt unless the questions deal with a sensitive aspect of a subject's behavior including, but not limited to illegal conduct, drug use, sexual behavior, or the use of alcohol. If the subject's identity is not recorded (anonymous) and/or the interview/survey questions are considered non-sensitive, then the research will probably be exempt. If the subject's response to the questions would pose a risk to that person if disclosed, then the research would receive an expedited review rather than an exempt review. Surveys and interviews of children are not exempt; however, children can be included if the research meets the criteria of category one described in 45 CFR 46.101. Research involving pregnant women and/or fetuses, prisoners, or the institutionalized mentally disabled cannot be exempt.

For all research, the investigator is required to provide adequate information about the research to potential subjects so that an informed decision can be made regarding participation. In research that meets the criteria for exemption, the investigator can deliver this information verbally or both verbally and in writing based on an IRB approved script or consent statement.

The following types of research qualify for an exempt review (45 CFR 46.101):

(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 (2), 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:

(i) 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 the federal 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,

(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 is consumed 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.

Additional Information:
Categories 2 and 3 may not be exempt if the research deals with a sensitive aspect of a subject's behavior such as illegal conduct, drug use, sexual behavior, or the use of alcohol, or questions that may cause distress. Surveys and interviews of children are not exempt. Observation of children is exempt if the investigator does not participate in the activities being observed. Research involving pregnant women and/or fetuses, prisoners, or the institutionalized mentally disabled is not exempt.

3.3.2 Existing Data

The research may qualify for an exemption if it involves the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens if: these data sources are publicly available or the
information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects (45 CFR 46.101(b) (4)).

3.3.3 Expedited Review

The IRB Chair or one or more experienced IRB members designated by the IRB Chair may review research that qualifies for an expedited review using criteria listed in 46.110 below. When conducting an expedited review, the designated reviewer(s) has the authority to act on behalf of the IRB with the exception of disapproving the research. During the initial review process, questions may arise that require the investigator to provide additional information or clarification about the protocol. Questions developed during the initial review are communicated to the investigator via electronic or standard mail or by telephone within three weeks of application submission. The investigator is given a 90-day timeframe during which the protocol file will be held in a “pending status” and he/she may respond to the stipulations posed by the IRB reviewer(s). Upon receipt and acceptance by the IRB representative(s) of the investigators response, approval to conduct the research is communicated to the investigator by standard mail or electronic correspondence. If the investigator does not respond to the stipulations for project approval within the 90-day time frame, the protocol is identified as inactive. IRB members are informed of initial and continuing review and protocol modifications reviewed using expedited procedures at the appropriate full committee meeting.

To determine if the research is eligible for an expedited review, please review the following federal requirements for expedited review:

(A) Research activities that (1) present no more than minimal risk to human subjects, 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 subjects.

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

(C) The expedited review procedure may not be used where identification of the subjects and/or their responses would reasonably place them at risk of criminal or civil liability or be damaging to the subjects 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 subjects.

(E) The standard requirements for informed consent (or its waiver, alteration, or exception) apply regardless of the type of review--expedited or full--utilized by the IRB.

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

Research Categories

(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, non-pregnant adults who weigh at least 110 pounds. For these subjects, 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, considering the age, weight, and health of the subjects, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these subjects, 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 non-disfiguring 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 gum base 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 sub-gingival 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, electoretinoscopy, 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 subjects. 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 subjects. 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 full IRB as follows: (a) where (I) the research is permanently closed to the enrollment of new subjects; (ii) all subjects have completed all research-related interventions; and (iii) the research remains active only for long-term follow-up of subjects; or (b) where no subjects have been enrolled and no additional risks have been identified; or (c) where the remaining research activities are limited to data analysis.
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 full meeting that the research involves no greater than minimal risk and no additional risks have been identified.

1. An expedited review procedure consists of a review of research involving human subjects 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)

3.4 Full Committee Review

If the research is not eligible for an exempt or expedited review the protocol must be reviewed by the full IRB membership at the monthly meeting. Research protocols to be reviewed during the full monthly meeting are accessible to the IRB members approximately 10 days in advance of the meeting. Therefore, protocols submitted for full committee review must be received on or before the posted deadline date, which is usually two weeks before the scheduled full committee meeting. Following presentation and discussion, the committee will vote on a motion to either: 1) approve the protocol as it stands; 2) request revisions to the protocol to secure approval; 3) request that additional information be provided prior to further review by the full committee; or 4) disapprove the protocol.

3.5 Review Time Period

The research protocol may qualify for an administrative (exempt or expedited) review (45 CFR 46.101 & 45 CFR 46.110). Completion of this review process may take up to three to four weeks. If the research requires review by the full committee, the investigator will be notified by either standard mail or electronic correspondence of the review decision within one week following the monthly meeting date. Protocols that require review by the full committee must be submitted on or before the posted monthly deadline date. Deadline dates pertain only to protocols that require review by the full committee. Administrative reviews are conducted in the order received. Completed protocols eligible for an administrative review should be submitted as soon as possible to receive the timeliest review.

3.6 Approval Criteria

For approval of a research protocol, the following federal requirements must be satisfied (45 CFR 46.111):

- Risks to subjects are minimized by using procedures which are consistent with sound research design and which do not unnecessarily expose subjects to risk.
- 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.
- Selection of subjects is equitable.
- Informed consent will be sought from each prospective subject or the subject's legally authorized representative.
- The research plan makes adequate provision for monitoring the data collected to ensure the safety of subjects.
• There are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of data.

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

3.7 Delay of Approval

The most common reason for delay is an incomplete application or an inadequate consent form. To avoid unnecessary delay, the IRB application instructions should be followed when writing the protocol, acquiring or assembling supporting documents or developing a consent form.

3.8 Funded Research

The investigator must append the descriptive section of the grant proposal (if DHHS) to his/her IRB protocol application (45 CFR 46.103f). In addition, the title of the IRB application must be consistent with the grant that the protocol represents. If an award is received, the CSUDH Foundation will not release funds until IRB approval is secured. The CSUDH Foundation has access to IRB review status for research receiving extramural funding.

3.9 Approval Review Pending Funding

45 CFR 46.118: 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. 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.

3.10 Review Decisions

3.10.1 Research Approved

If the proposal is approved, an electronic letter from the IRB stating the approval date and terms of approval will be sent to the investigator. In addition, a master of the IRB-approved and stamped informed consent document will be sent to the investigator.

3.10.2 Revisions Required to Secure Approval

A conditional approval or approval with stipulations is awarded if there are minor correctable problems found in the protocol. In this situation, a letter (delivered electronically) is sent to the investigator detailing the areas that the IRB has identified for the investigator to address. Research may not commence until the stipulations have been addressed and accepted by an IRB representative. The investigator is provided with a 45-day time period within which the stipulated conditions must be addressed. If a response is not received within the 45-day limit, resubmission may be required. The IRB determines, upon initial review, whether the investigator’s response to stipulations will require subsequent review by the full committee or can be reviewed via subcommittee or administrative review (e.g., the Chair).
3.10.3 Insufficient Information to Complete Review

If a determination for approval cannot be made due to pertinent information missing from the protocol, the investigator is informed of information needed by the IRB to complete the review. Research activity may not commence until the investigator has provided the information and the IRB has reviewed and accepted the response.

3.10.4 Disapproval (45 CFR 46.109)

If the research is disapproved, the investigator may not conduct the proposed research. The IRB will provide the investigator with the reason for its decision. The investigator may resubmit the protocol to the IRB for review if the reasons given for disapproval can be corrected and addressed.

3.11 Approval Period (45 CFR 46.109(c))

IRB approval is valid for up to one year from the date of initial review (45 CFR 46.109). The length and terms of approval is determined by the IRB based on project complexity, degree or type of risk associated with participation, and the investigator’s history of compliance with ethical practices. Protocols that are verified as exempt are valid for the length of the stated project period provided no changes are made to the protocol.

3.12 Determining Risk

The IRB determines whether the proposed research exceeds minimal risk on a case-by-case basis with consideration to the procedures proposed and subject population to be involved in the research.

3.13 Appeal of IRB Decision

If the investigator is not satisfied with the decision of the IRB following review, or with the process by which a decision is rendered, an appeal process may be enacted. To initiate the appeal of an IRB decision, the investigator must submit a statement to the IRB noting areas of contention.

3.14 Communication with Investigators

The investigator will receive an electronic message from the IRB office to indicate that the protocol was received and had an initial review. Once the investigator has received notification that the protocol is approved, research may begin. If a conditional approval is granted, the correspondence will detail the topics that require a response. Upon IRB review and approval of the response, the investigator will receive correspondence indicating Committee approval. Approximately six weeks prior to the protocol expiration date, the IRB office will advise the investigator to complete a progress report, which must be reviewed and approved by the IRB prior to the protocol expiration date. It is the investigator’s responsibility to submit this report.

4.0 Protocol Development

4.1 Where to Begin?

This section provides guidance that may be useful in preparing a protocol and informed consent document for review by the IRB.
Prior to developing a protocol, review Ethical Principles and Guidelines for the Protection of Human Subjects of Research also known as The Belmont Report  [http://www.hhs.gov/ohrp/policy/belmont.html](http://www.hhs.gov/ohrp/policy/belmont.html) and complete your institution’s human subjects’ research ethics education program (see section 1.12 Educational Requirement).

4.2 Protocol Guidance

The Institutional Review Board reviews the study protocol to determine study benefit and to assess risk and risk management procedures. This guidance is for use in creating a protocol specific to the research study. The protocol is the most important section of the IRB application as it outlines the specific procedures that will be followed during the course of the study. One of the most common reasons for delay of IRB approval is due to an incomplete protocol. The investigator must not assume that members of the committee understand the proposed research well enough to infer details about the study; the protocol must be explicit, yet concise about the study details according to the guidance provided within each section.

4.3 Study Abstract

The IRB uses the study abstract to gain a general understanding of the scope of the research and to verify the type of review that is needed (e.g. exempt, expedited, or full committee). The abstract should provide the IRB member with a basic understanding of why the study is being conducted, how it will be carried out, how the results will be interpreted and how risks will be managed. Specifically, the abstract should include a one-paragraph summary of the protocol that includes a brief description of the study purpose/objective, methods, subjects, planned analyses, potential benefits, potential risks, and risk management procedures.

4.4 Statement of Purpose and Background

One of the major responsibilities of the IRB is to assess the risks and benefits of proposed research. Part of the process of risk/benefit analysis includes reviewing what has been done in the past and what should be done in the future in order to gain a better understanding of the phenomenon under study. Therefore, the IRB must review a summary of the literature and other background information (e.g. pre-clinical/animal data if relevant or other facts) in order to justify approval of the proposed human subjects research study.

Within this section, which should be limited to one page, relevant background information and literature reviewed to provide the rationale for the proposed research should be discussed. The relevance of this research to and potential for contribution to the field of study should be stated. Justification for involving humans in the research should be provided. If relevant, a summary of pre-clinical/animal data that have been obtained through other research and a reference list/bibliography at the end of the protocol should be included.

4.5 Subjects

The IRB is required to evaluate whether subject selection procedures for a given research study are fair to ensure that the burdens of research participation are distributed equitably across groups of people. Therefore, information regarding the characteristics of subjects that will be involved in the proposed study is needed to conduct an adequate IRB review. Additionally, the IRB must consider recruitment procedures for the proposed study to ensure that a broad cross-section of research subjects are included in the research and to evaluate the procedures that will be established to protect subject privacy during the recruitment phase.

4.5.1 Subject Characteristics

Within this section, the investigator will define the group of subjects that are appropriate for use in the research study and provide a description of subject characteristics (e.g., type of population, number of subjects, gender, age range, etc. The application will prompt the investigator to indicate the specific type of subject group(s) to be
included in the research. The investigator will provide additional information to justify inclusion of special populations in the research where ability to acquire informed consent may be limited.

4.5.2 Number of Subjects
Within this section, the investigator will state how many subjects are planned for recruitment into the study and describe how the number of subjects was determined.

4.5.3 For studies involving Special Populations or Vulnerable Subjects
Special populations or vulnerable subjects include children, pregnant women, prisoners, physically or cognitively challenged, economic or socially disadvantaged, subordinate individuals (e.g. students and employees), and fetuses. Additional safeguards for all subjects that are likely to be vulnerable to coercion or undue influence must be included in the study to protect the rights and welfare of these subjects (45 CFR 46.111(7) (b)). The investigator will specify additional safeguards are included to protect these participants.

The degree to which these potential subjects are vulnerable is directly related to the degree to which these individuals are capable of volunteering or providing informed consent to research participation. There are specific federal regulations (45 CFR 46 Subparts B - D) that apply to conducting research with vulnerable populations which assures that the risks associated with participation are minimal or that the research is of direct benefit to the subjects. Special considerations will be made by the IRB in reviewing protocols that include vulnerable subjects.

4.5.3.1 Children
The Code of Federal Regulations (45 CFR 46.401 Subpart D) describes additional protections for children involved as subjects in research. A child is defined by the State of California as a person who is under the age of 18 years and is not legally emancipated (link to state law on emancipation. http://www.leginfo.ca.gov/cgi-bin/displaycode?section=fam&group=06001-07000&file=7000-7002).

The IRB may only approve research involving children when all conditions of this subpart are satisfied as follows:

- The research does not involve more than minimal risk (i.e. does not expose the child to greater risk than encountered in daily life).
- The research involves greater than minimal risk, however the individual subject may receive direct benefit from participating in the research.
- The research involves greater than minimal risk with no prospect of direct benefit to the participant, however, the results of the research will contribute to generalizable knowledge about the subject's disorder or condition.
- The research, while otherwise not approvable presents an opportunity to understand, prevent, or alleviate a serious problem affecting the health or welfare of children.

4.5.3.1.1 Involving Children in Research at School
The IRB must determine if it is appropriate to involve school children in a research study. School children can be involved in research when the data collected will be used to assess classroom instructional strategies/techniques, curricula development, or classroom management techniques. The investigator will discuss whether class time is used or if children are participating outside of structured class time (address nonparticipating students, supervision of non-participants, procedures used to pull out children/subjects during class time, etc.).
4.5.3.2 Fetuses, Pregnant Women, and Human in Vitro Fertilization

The Code of Federal Regulations (45 CFR 46.401 Subpart B provides additional safeguards for research that involves fetuses, pregnant women, and human in vitro fertilization. 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 non-pregnant 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. The IRB must determine that all aspects of the research comply with this subpart. The IRB must give special consideration to subject selection, monitoring and oversight of informed consent, and monitoring the research as needed. For more guidance on research involving fetuses and human in vitro fertilization, or on inclusion of pregnant women in research, please review the Office for Human Research Protections (OHRP) IRB Guidebook: [http://www.hhs.gov/ohrp/](http://www.hhs.gov/ohrp/).

4.5.3.3 Cognitively Impaired (45 CFR 46.111(b))

When recruiting participants who are cognitively impaired, the investigator must evaluate whether the potential subject is capable of making an informed choice to participate in the research. The process used by the investigator to determine participant autonomy must be described in the protocol. If the individual is deemed
competent to make an informed choice, it may be necessary to include additional procedures during the consent process to ensure that the prospective subject understands the information presented about the study. The investigator may consider including questions at the end of each section of the consent document to use in assessing participant comprehension of the consent content. This mechanism allows for the investigator to clarify the participant's understanding of specific aspects of the study as the consent process occurs (e.g., After the Description of the Study section, you may ask: Do you understand what will happen during the testing phase? The training phase?). If the individual is not legally able to consent for him/herself, the person who is legally authorized to serve as the individuals advocate and caretaker is responsible for determining whether the proposed study is appropriate.

4.5.3.4 Prisoners (45 CFR 46.401 Subpart C)

The Code of Federal Regulations 45 CFR 46.401 Subpart C allows the IRB to review and approve research that includes prisoners when the following conditions are met: The study does not place the subject at more than minimal risk and the investigation pertains to possible causes, effects and processes of incarceration and of criminal behavior or the investigation pertains to prisons as institutional structures or of prisoners as incarcerated individuals or the investigation pertains to conditions that affect prisoners as a class of people (e.g. vaccine trials, research on disease that is more prevalent in prisoners than other groups and research on social and psychological problems of prisoners such as alcoholism, drug addiction and sexual assaults) or the study has the likelihood of improving the health or well-being of the prisoner.

4.5.3.5 Women and Minorities

Federal guidelines require that NIH-funded studies incorporate a research design that is sufficient to elicit information about individuals of both sexes/genders and diverse racial and ethnic groups to examine differential effects of research procedures on such groups. For more information on this topic, please go to: http://grants.nih.gov/grants/funding/women_min/guidelines_amended_10_2001.htm

4.5.3.6 College Students

The IRB tries to estimate the degree of situational coercion and, through guidelines, assists researchers to reduce the pressure that a student may experience when recruited to participate in research. The IRB encourages investigators to follow recruitment procedures intended to create the opportunity for students to participate in research while reducing the possibility of unintended coercion. For example, the investigator is encouraged to avoid one-on-one solicitations of students by faculty, graduate assistants or other students. If research participation is a course requirement, offer an equitable alternative to participation in a study as a method of obtaining course credit (e.g., summarize a journal article, attend a research lecture, and assist with data collection) and conduct data collection outside of the scheduled class time.

When student records are needed to identify potential participants, the protocol must be in compliance with the Family Educational Rights and Privacy Act (FERPA). The IRB will confer with Enrollment Services to confirm compliance with FERPA requirements.

4.5.3.7 Employees

The IRB must consider the potential for coercion or undue influence and breeches of confidentiality when employees are recruited as research subjects. The investigator should state how voluntary participation will be ensured if the subjects under study are recruited by their employer. Recruitment procedures should allow for employees to participate in the study without jeopardizing their job status, their pay or their relationship with their supervisors.

4.5.4 Selection Criteria & Screening
The IRB must review the criteria by which subjects will be selected for study participation to determine whether subject selection practices are equitable and justified. The research protocol should also include rationale to support the selection criteria. In order for the IRB to know that subjects will be selected appropriately, the protocol should describe how the inclusion/exclusion criteria will be assessed and by whom (include a description of the assessor’s professional qualifications/credentials if relevant). The IRB is concerned about protecting subject confidentiality and for ensuring that a prospective subject has given informed consent before disclosing private information. In certain cases, investigators are interested in screening individuals before they are formally enrolled into the study to determine whether they meet the basic study selection criteria. This process can often lead to disclosure of private information prior to obtaining and documenting informed consent. Therefore, if a screening procedure will be used, the IRB requires information about how screening will take place (e.g. interview, survey, records review) and how data collected during screening will be handled if the person is found to be ineligible (e.g. used as research data or destroyed). If individuals will disclose private information, the IRB will review the procedures used to obtain consent from the person in advance of implementing screening procedures. If the protocol identifies specific inclusion and exclusion requirements to determine subject eligibility (e.g., age, physical or psychological condition), the IRB will review a screening checklist in which specific inclusion and exclusion criteria are listed and defined. The IRB will review the procedures used to document appropriate screening of subjects. For example, it is recommended that the investigator complete a screening checklist for each subject enrolled and maintain the checklist in the study master file or individual subject files.

4.5.5 Recruitment Source

The IRB reviews information regarding the location from which subjects will be recruited (e.g., schools, university campus, fitness facilities, hospitals). The IRB will review confirmation that the investigator has obtained permission from the institution to conduct this protocol within a private facility.

4.5.6 Recruitment Methods

The IRB requires a description of how and by whom potential subjects will be identified and recruited. If records are accessed to identify potential subjects, the IRB will review a description of procedures used to ensure that records are only accessed by those with consent from the individual.

4.5.6.1 Legitimate Access to Records

A primary concern of the IRB specific to subject recruitment involves protecting the privacy and confidentiality of prospective subjects. Recruitment procedures in which names of individuals are released from private sources to an investigator are generally not endorsed by the IRB. Recruitment procedures should allow for the individual to consent to the release of information in advance of being contacted directly by an investigator.

Established Legal/Ethical Protections:

• The IRB advises against the release of identifiable private information from a source to an unaffiliated researcher without the permission of the potential subject where legal and ethical guidelines prohibit the source from doing so.

• An example of when this may occur is when a researcher is attempting to identify prospective subject according to specific eligibility criteria for recruitment to a study by accessing private files through a hospital or medical clinic.

• To obtain permission to access private and identifiable information about a prospective subject, the researcher will need to propose procedures to obtain consent from the individuals involved. This may be in the form of a release form used by the source to document permission to release information to the researcher (HIPAA and FERPA regulations may pertain). The consent statement should include information about what information is requested, how it will be used and to whom it will be given. Review and acceptance of this consent document by the IRB is required in advance of its use.
No Established Legal/Ethical Protections:

- The IRB recommends against the release of information about an individual where the individual about whom information is to be released may normally consider the information to be private - although not protected by law or the ethics of a specific profession.

- The IRB advises against procedures that involve a person or organization providing information about another individual/potential subject without his/her permission for the purpose of recruitment.

- The IRB recommends procedures that allow for an organization or an enrolled subject to provide information about the study to a prospective subject (flyer, postcard or other announcement) that allows for the prospective subject to initiate contact if he/she would like additional information about the study.

Please note: Research involves the collection or study of existing data, documents, records or specimens where the sources are either publicly available or recorded in a manner that subjects cannot be identified, directly or through identifiers linked to the subject may meet the criteria for exempt review.

4.5.7 Recruitment Announcements

Advertising a research study for the purpose of recruiting participants is part of the informed consent process. Printed or electronic media intended for use in subject recruitment are reviewed by the IRB to ensure that the procedures proposed for informing potential subjects are not coercive and do not state or imply an outcome or other benefit beyond what is outlined in the consent documents and the protocol.

Recruitment advertisements, such as flyers, postcards, brochures, newspaper advertisements, press releases, or postings on the Internet are reviewed for the accuracy and presentation of information the prospective subject needs to determine their eligibility and interest. This includes the review of content, language, and design. Information should not be misleading to subjects, as such, the use of words that appear neutral as opposed to sensational are encouraged. Attention should be paid to the use of appropriate graphics, font size and format/design, and to accurate spelling and punctuation. It is recommended that the following information should be included in recruitment materials, subject to final review by the IRB committee:

1. name and address of the principal investigator and/or research facility;
2. concise description of the purpose of the research;
3. eligibility criteria for subject participation;
4. time or other commitment required of the subjects; and
5. location of the research and person to contact for further information.

Please note:
In medical studies, advertisement materials should make no claims, either explicitly or implicitly, that the research activity is safe, effective, equivalent, or superior to any other current practice.

Reference to incentives offered may include that subjects will be paid and may include how much, but should not emphasize the payment or the amount to be paid.

4.5.8 Recruitment Incentives – Finder’s Fees and Bonus Payments

Any remuneration (in cash or in kind) for patient referral is considered unethical and is not permitted as it may compromise the provider-patient relationship. The policy set forth by the American Medical Association Code of Ethics states: “Payment by or to a physician solely for the referral of a patient is fee splitting and is unethical.” Referral incentives may include, but are not limited to monetary compensation, stock options, material goods or other incentives such as food or entertainment. In addition, bonus payments to the investigator, study coordinator
or provider for the purpose of encouraging recruitment of subjects to the study may compromise the judgment of the research team and is not acceptable.

The IRB does not endorse practices that involve remuneration of any kind to a provider for patient referrals or bonus payments to members of the research team for purposes of subject recruitment.

Please visit the American Medical Association web site for more information on this topic.
http://www.amaassn.org/ethic/ceja.65b.pdf

4.5.9 Potential Problems

Address any potential problems involving subject identification, recruitment or data collection that may negatively influence your ability to conduct this study.

4.6 Informed Consent Process and Procedures

"Informed consent is one of the primary ethical requirements underpinning research with human subjects; it reflects the basic principle of respect for persons. It is too often forgotten that informed consent is an ongoing process, not a piece of paper or a discrete moment in time. Informed consent assures that prospective human subjects will understand the nature of the research and can knowledgeably and voluntarily decide whether or not to participate. This assurance protects all parties - both the subject, whose autonomy is respected, and the investigator, who otherwise faces legal hazards. The "proxy consent" of someone other than the subject is not the same as the subject's own consent, although it may be an acceptable substitute when a subject is unable to give informed consent." (OHRP IRB Guidebook http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.htm#46.117,).

4.6.1 Informed Consent Process

The investigator is responsible for ensuring that the consent process, as specified below, is followed. The IRB-approved consent form (based on the institution's template) must be signed before any research activity begins. Approval for the study will be withdrawn if informed consent is not obtained and properly documented.

The IRB will review the process used to present the study to potential subjects. The study should be presented in a language that is clear and understandable to ensure full disclosure of the research and assess the potential subject's understanding of the research (i.e., purpose of the study, risks, benefits, confidentiality, investigator's telephone number to call for questions, etc.).

The IRB will also consider how and where the research will be introduced to the subject to assess whether the timing and setting of the informed consent process is conducive to objective decision making. During the consent process, the investigator must ensure that everything is done to enhance the prospective subjects' comprehension of the information and their ability to make a choice. The IRB will review the procedures developed by the investigator that may be used to inform all research subjects of any new information that might affect their willingness to continue participating in the research. If this study involves a longitudinal design, the IRB will review a description of the mechanism whereby consent can be renegotiated, as needed, and subjects can be reminded periodically of the terms of their participation in the research.

If minor children are involved in the study, the IRB will review the process used to obtain parental consent as well as assent from the minor child.

If persons who are cognitively impaired will be recruited for this study, the IRB will review information the process used to ensure that the prospective subject understands the information presented about the study.
4.6.2 Informed Consent Procedures

It is important to include a description of the person who will make initial contact with the potential subject to demonstrate that this individual is knowledgeable about the study, can present the information to laypeople and will promote voluntary participation. The IRB will review the qualifications of the individual(s) who will present the study to potential subjects. The IRB will review the qualifications and training of the person who will be asked to inform potential subjects of the study, answer questions the subject may have about the study and document this process by via a signed consent form. The investigator will identify who will verify that the consent form is signed. The IRB will review procedures developed to retain the signed copies of the consent document and Research Participant's Bill of Rights (for studies that involve medical experimentation) in your records for three years.

If non-English speaking persons will be recruited, the IRB will review a description of the qualifications of the person who will conduct the translated consent process (verbal and written). Both the English and translated versions of the Consent Form need an IRB approval stamp.

4.6.3 Waiver of Consent Requirements

If waiver of consent, alteration of consent content or waiver of consent documentation is requested, the IRB must review justification to support the request.

As per 45 CFR 46 116 (c), the IRB may waive the requirement to obtain informed consent or approve a consent procedure which alters some of the consent content if the IRB finds and documents that:

a. The research is designed to evaluate a public benefit or service program and the research could not be carried out without the waiver or alteration or
b. The research involves no more than minimal risk to the subject;
c. The research could not be carried out without the waiver or alteration and
d. When appropriate, the subjects are provided with additional information after participation.

4.6.4 Waiver of Consent Documentation

The IRB may waive requirements to document voluntary participation via a signed consent form if 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 (45 CFR 46.117 (c)).

4.6.5 Consent Document

The IRB will review the consent document(s) for use in obtaining and documenting consent from study participants. Consent forms must adequately describe the study using language appropriate for the target audience. If relevant, the investigator will be asked to translate consent documents into the subject’s primary language after the English version of the consent form has received IRB approval.

4.6.6 Assent from Children (45 CFR 46.408)

Assent is demonstrated by a child’s agreement to participate in research. In California, a child is a person who is under the age of 18 years (unless legally emancipated). It is required that the researcher makes adequate provisions to solicit assent from children unless the IRB waives this requirement.

The IRB will review a description of the process and procedures for obtaining assent from the child. To determine whether the child is able to assent depends on the child's age and maturity. If the child is considered to be capable of providing assent, whether or not assent is documented is also determined by the IRB. Generally, children are able to read and write to some extent by age 7. As such, documenting assent by having the child
sign an assent form is usually a procedure that is incorporated for children age 7 – 17. When documentation is not required, the IRB requires that the investigator conduct the assent process through a verbal interaction and the IRB will review a script of what will be said during the verbal consent process.

4.7 Research Design and Methods

The IRB evaluates the research design to weigh the potential benefits of the study as compared to the potential risks. The protocol must include adequate information about the research design for the IRB to make an informed judgment that the design will result in meaningful and valid data. The IRB will review a description of the research design, the scientific rationale underlying the proposed research and the statistical basis for the structure of the investigation. The IRB will also review the specific aims of the research the hypotheses to be tested, the questions to answer and the type of data to be gathered and tested.

Note that the IRB Guidelines from the Federal Government state, “The value of research depends upon the integrity of the study results. One of the ethical justifications for research involving human subjects is the social value of advancing scientific understanding and promoting human welfare by improving health care. But if a research study is so methodologically flawed that little or no reliable information will result, it is unethical to put subjects at risk or even to inconvenience them through participation in such a study.”

If the IRB determines that the experimental designs or statistical methods are inappropriate, the investigator will be asked to make revisions so that review of the protocol may continue. Some common issues to consider include the appropriate number of subjects, the power of the study (effect size estimates), the type of statistical procedure (e.g., parametric versus nonparametric), and the type of study. This level of review is not common when the protocol is associated with a proposal that has undergone peer review.

4.7.1 Subject Involvement

The IRB will review the tasks that subjects will be asked to complete during the course of a study. Specifically, the protocol should describe what subjects will do during their involvement and the amount of time that participation in each aspect of the study will take. The protocol should also discuss investigational, experimental, or special procedures that will involve the subject (medical devices, electrical equipment, etc.). If the research involves exercise testing, blood draws or DEXA scans, review the Exercise Protocols section of this guidance.

4.7.2 Research Instruments

The IRB reviews all research instruments such as surveys, interviews or questionnaires planned for use in data collection. As such, the investigator is asked to include all interview schedules and survey instruments with the completed protocol application. The investigator may submit draft versions of study instruments for review; however, the IRB must review the final instruments prior to approving the use of those instruments for data collection. For qualitative research, final instruments may not be available; however, please provide the draft instruments for IRB review.

4.7.3 Deception or Incomplete Disclosure

Deception involves not fully informing subjects of the real purpose of the study or providing false information about the study to subjects. This may be appropriate and justifiable in some circumstances, particularly in social and behavioral research. If the protocol involves deception, the IRB must review a complete description how deception will be used. The IRB will need adequate justification for the inclusion of deception and possible alternatives to the use of deception. In studies involving deception, the protocol should include procedures to debrief subjects following participation. The debriefing statement should be presented both orally and in writing and include a description of the deception involved and an explanation about the true purpose of the research. In addition, this statement should inform subjects of their right to withdraw their data from the study. If the participant
should feel upset or uncomfortable with the deception involved, procedures should allow for the receipt of any incentives offered should the participant decide to discontinue participation.

4.7.4 Study Location

The IRB will determine the appropriateness of the location and the setting where subjects will participate in this research. The protocol should address any special considerations associated with recruitment or data collection at the location (e.g. identifying potential subjects, obtaining voluntary participation, confidentiality of data and privacy concerns). Performance Sites: If the research is supported by federal funds and persons not affiliated with the institution will conduct the study, it is necessary for the investigator to document that the facility has an assurance with OHRP and that a local IRB has reviewed the study for conduct at the performance site.

4.7.5 Special Procedures

The IRB will review a description of any investigational, experimental, or special procedures that will involve the subject (medical devices, electrical equipment, etc.).

4.7.5.1 Exercise Testing

If participants will be exposed to exercise or exercise related testing, the IRB will review a description of these activities. For additional information, please refer to section 4.15 and relevant subsections of this Guidebook for access to IRB-approved exercise protocols and consent content. If the study involves the exercise tests included in this guidebook, the investigator is responsible for following the exercise protocols as written. The investigator is also required to incorporate the informed consent content as written in this Guidebook, as appropriate, within the consent document that will be used in the study. Approval for the study will be withdrawn if the exercise protocols are not followed as written.

4.7.5.2 Genetic Samples

If samples or specimen will be collected from participants and evaluated for genetic information, the investigator is required to provide the IRB with the following information:

a) If the study involves genetic testing, issues should be addressed pertaining to confidentiality of information collected.

b) The investigator must state whether or not the genetic information collected about the subject could pose a risk to them (e.g. denial of health insurance because of known predisposition to illness).

c) The investigator must state whether other genes will be studied in the DNA that may be shown at some point in the future to be related to illness.

d) The investigator must describe how blood samples will be coded and stored.

e) The investigator must explain whether or not any of the laboratory results will be made available to subjects, and whether the results will be added to the subject’s medical record.

f) The investigator must state whether the specimens collected the DNA obtained from that specimen will be used in additional research to be conducted and whether or not the DNA will have significant therapeutic or commercial value. To protect subject privacy, all information that links the subject’s specimens and DNA to his/her identity must be removed prior to use in any research conducted outside of this specific study so that the sample that provided cannot be traced back to the individual subject.

For additional information on collecting genetic samples for research purposes, please see section 4.15.2.

4.7.5.3 Use of Drugs and Devices
The IRB will review a description of the drugs and/or devices proposed for use in this study and the safety and efficacy issues associated with each drug and/or device. The IRB will review evidence to suggest that the product being tested is safe for use with humans. For additional information on using non-FDA approved drugs and devices for research purposes, please see section 4.15.3.

4.8 Potential Benefits

The IRB must determine that conducting the proposed study will result in a benefit either to science/society or to the individual participant. Therefore, the investigator must provide the IRB with a clear description of the anticipated benefits that will be derived from this study.

4.9 Risks

Research subjects may be exposed to risks as a result of participation in a study. When recruiting participants for research, information about the types of risks associated with study participation must be presented to each prospective subject. The Office Human Research Protections (OHRP) has provided the following descriptions of risks that may be associated with research participation. Physical harm is often associated with research involving medical procedures; however, it can also be related to research testing aspects of physical fitness or public health concerns. Minor pain and discomfort, as well as drug side effects or injury resulting from an invasive procedure should be considered when evaluating exposure to physical harm. The physical risk may be minor and transient; however, some procedures may result in adverse events that may be considered serious and possibly permanent. Psychological harm may occur when subjects are asked to disclose or think about personal feelings and/or behaviors or are involved in an experiment that involves a manipulation of the environment or deception. The subject may experience changes in awareness, thought processes and emotion as a result. Social or Economic harm is associated with research where sensitive information about the subject (e.g., alcohol and other drug abuse, mental illness, illegal activities, etc.) is obtained. A breach in the confidentiality of this information may lead to the individual being labeled in a way that could affect their reputation, insurance eligibility, or employment.

4.9.1 Management of Risk

The IRB will review the precautions, safeguards and alternatives incorporated into the research activity to reduce or limit the severity, duration and likelihood of harm. If the study activities place the subject at greater than minimal risk for injury, the investigator will describe what the potential subject will be told during the consent process and describe whether and who will cover treatment for any injury associated with the study.

4.9.2 Data Safety Monitoring Board (DSMB)

"Monitoring of the research by the researcher is important because preliminary data may signal the need to change the research design, change the information presented to subjects, or even to terminate the project before the scheduled end date." (OHRP IRB Guidebook, Available: http://www.hhs.gov/ohrp/policy/index.html#topics). When applicable the IRB will review the process used to monitor data collected to ensure the safety of subjects (e.g., clinical trial studies). Note that all Phase III randomized clinical trials supported or performed by the National Cancer Institute (NCI) require monitoring by a DSMB.

4.9.3 Assessment of Risk

The IRB will review information provided by the investigator to assess whether the risks and inconveniences associated with the research are reasonable in relation to the anticipated benefits to the subjects and in relation to the knowledge that may reasonably be expected to result from this research.
4.10 Confidentiality Procedures

To maintain confidentiality of research data, the investigator should protect information obtained from the subject to avoid the unintentional access by others. A federal Certificate of Confidentiality may be issued to protect sensitive data from being subpoenaed by a court of law. The IRB may determine that documentation of informed consent be waived if this process increases the risk of a breach of confidentiality. Subjects should be provided with information about the procedures used to protect confidentiality.

Guidelines for developing procedures to address confidentiality include:

- Limiting the personal information recorded to that, which is essential to the research;
- Storing personally identifiable data securely and limit access to the principal investigator and authorized staff;
- Coding data as early in the research as possible and disposing of the code linking the data to individual subjects when data have been processed;
- Not disclosing personally identifiable data to anyone other than the research team without the written consent of the subjects or their legal representative. (Exceptions may be made in case of emergency need for intervention or as required by regulatory agencies).
- If the data are considered to be sensitive (e.g., sexual preference or practices, use of alcohol or other drugs, illegal conduct, psychological or mental health records, etc.) and place the subject at legal risk more elaborate measures to protect confidentiality may need to be implemented. In some cases, it may be appropriate to apply for a federal Certificate of Confidentiality http://grants.nih.gov/grants/policy/coc/index.htm. For more information about the purpose and use of a federal Certificate of Confidentiality, please visit the NIH Office of Extramural Research website: http://grants1.nih.gov/grants/policy/coc/.

4.10.1 Anonymity and Confidentiality

Anonymity means that the identity of the subject is not known to the researchers, and is never recorded or associated with the data collected. Maintaining confidentiality involves recording but concealing the subject’s identity or codes linked to the individual’s identity. The IRB will review the procedures used to maintain either anonymous or confidential data. If the subject’s identity will be recorded or a code will be created which is linked to the subject’s identity, the IRB will review the rationale for doing so. If it is necessary to track information over time, the investigator should consider using a coding strategy that is not linked to the subject’s identity if at all possible.

4.10.2 Reportable Disclosures

State law and mandated reporting requirements may limit the extent to which the investigator is able to protect the subject’s confidentiality. If through interview or measurement, the subject is likely to disclose illegal or dangerous behavior (e.g. if the subject reports any kind of abuse or serious harm to self or others) the investigator must disclose whether and to whom information will be reported. The consent document should include a description of the limits to confidentiality.

4.10.3 Coding Data for Tracking Purposes

In survey research, an investigator may wish to code data to track respondents. The investigator may wish to recontact non-respondents or publish information about non-respondents to describe the study sample. The IRB
considers these tactics appropriate as long as individuals are informed at the beginning of the study during the informed consent process. If coding will be used for tracking purposes, the IRB will review a description of the coding scheme used to track respondents and non-respondents. If the individual's identity is linked to the code, the IRB will review how this information will be used once data collection is complete.

4.10.4 Image and Voice Recording

The IRB will review where the subject's image or voice will be presented and to whom if the study involves the use of the audio or video recordings. The subject should be informed about how images may be used within the consent document. If the investigator would like permission to present the recorded image for purpose other than the specific research for which the subject is consenting, an addendum to the consent is used to obtain this authorization.

4.10.5 Record Storage and Access

In an effort to further protect subject privacy, the IRB will review where and for how long research records will be stored and who will have access to the study data (hard copy or electronic files) once data have been collected and filed. The IRB will review procedures used to dispense of research records, samples/specimens upon completion of the research activity.

4.10.6 Release of Test Results

Data collected for research purposes may also be relevant to the participant's physician or other professional. In some cases, it may also be appropriate to disclose test results to the participant. This may depend on the investigator's training in accurately interpreting the results of a test that has been used for research purposes and the implications of imparting this information to the subject (e.g. access to healthcare or mental health counseling services). The protocol should address the collection of data that may also have clinical relevance and describe whether this information will be disclosed to the participant and/or to a clinical professional determined by the participant.

4.10.7 Transportation of Data

If data are collected at an off-site location, the protocol should include procedures to ensure that data will be transported in a manner that minimizes risks associated with the inadvertent loss or theft of data.

4.10.8 Certificate of Confidentiality

If the research includes disclosure of potentially sensitive or illegal information, additional measures to protect the participant's privacy and confidentiality may be needed. A Federal Certificate of Confidentiality provides additional protection for the subject in that the data would be protected from subpoena by a court of law.

4.11 Costs

“Participation in research may result in additional actual costs to individuals. Any anticipated costs to research participants should be described to prospective subjects during the consent process.” (OHRP IRB Guidebook, Available: http://www.hhs.gov/ohrp/irb/irb_chapter3.htm#e2). If this study exceeds minimal risk, state how costs pertaining to any injury incurred due to study participation will be covered and by whom. A study that exceeds minimal risk means that the probability or magnitude of harm or discomfort anticipated in the research are greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests (45 CFR 46.102).
4.12 Compensation and Incentives

To assist in subject recruitment, an incentive may be offered. The IRB considers the appropriateness of study compensation/incentives when reviewing protocols. The incentive should be reasonable compared to the burden or inconvenience incurred by study participants. It is important that the incentive be awarded for participation in the study rather than for completing a specific task. The purpose of the incentive is to encourage participation. By awarding the incentive only when a task is completed, it may create an undue influence that does not allow for the participant to discontinue if uncomfortable. The amount and type of incentive should not coerce or unduly influence the prospective subject into participating. The incentive is not contingent on study completion. Potential participants should understand what incentives would be offered before agreeing to participate in the study. The terms of the incentive should be described within the consent form. Incentives may also be described on recruitment materials, but should not be sensationalized or exaggerated.

4.12.1 Prorating

The IRB encourages the use of a prorated incentive payment system. This allows for the subject to be paid as the study progresses and does not create the perception of a penalty for discontinuing participation. In some cases, the incentive structure involves graduated payments over the course of the study to encourage continuation without creating an undue influence for participation. The IRB may accept procedures to pay the incentive in one payment at the end of the study when there is a direct benefit to the subject and a complete data set (all sessions, all interviews, and all surveys) must be acquired in order to draw any conclusions.

4.12.2 Coercion/Undue Influence

IRBs may approve research studies that minimize the possibility of coercion or undue influence. To do so, the IRB reviews incentives to determine if they are appropriate given the potential for risk or significant discomfort that research participants may experience.

4.12.3 Lottery

If a lottery incentive will be used, the participant informed consent should include an estimated timeline for when the information about the drawing will occur, how the person will be notified, how many prizes will be offered and the chances for winning one of the prizes (e.g. You have a one in five chance of winning a prize in the drawing.)

4.12.4 Amount

The IRB will consider the value of the incentive in order to determine its appropriateness and to minimize the potential for coercion.

4.12.5 Payment Type

IRBs must determine whether paid research participants are paid appropriately. If a monetary incentive will be offered, the investigator must consider how subjects will be paid – either through cash, check/money order or other type of redeemable coupon. The investigator must consider potential breeches in confidentiality if payment type is provided in a form other than cash.

4.12.6 Staggered Schedule

The investigator may want to consider compensating participants for each task in the study that is completed. A payment schedule allows for subjects to receive partial payment even if they do not complete all study activities. The amount of the incentive may change depending on the nature of the task that the participant is asked to complete. The investigator may want to consider increasing the amount of compensation each time the subject
completes a study task to promote continued study participation (for example, if the study is longitudinal). The IRB will review the payment schedule to determine that the incentive schedule does not appear coercive to unduly influence the subject's decision to participate.

4.13 Investigator Experience

The IRB considers the investigator's experience in the area of research to be undertaken to ensure that the research will be carried out appropriately. The IRB will review a brief summary of the investigator's relevant research experience/training. If the investigator is a student, the IRB will also review a summary of the faculty member's experience responsible for supervising the research.

4.14 Conflict of Interest

The IRB considers the investigator's financial interests when evaluating the protection of human subjects. If a financial interest is reported, the IRB will assess the investigator's objectivity in communicating risks, selecting subjects, promoting informed consent, and gathering, analyzing and reporting data. The IRB will review whether the investigator (including spouse or dependent child) or any person affiliated with the project has any financial interest, financial relationship, governance or administrative affiliation with any entity that is providing funds for or which has rights to intellectual property resulting from this study.

4.14.1 Disclosure within Consent Form

If the investigator has disclosed a financial interest in the research, the consent form should describe the financial interest as well as how the interest has been managed to avoid the possibility of a conflict in the conduct of the research.

4.15 Special Considerations

There are certain types of studies that require the investigator to submit specific information to the IRB. These studies include, but are not limited to exercise testing, genetic testing, testing of non-FDA approved substances, studies conducted over the Internet and studies involving women of child-bearing potential.

4.15.1 Exercise Testing: Guidelines for research in Exercise Testing that involve Maximal Aerobic Power (VO2max); Endurance Test Protocols; Hydrostatic Weighing; Venipuncture; Bone Mineral Density (DEXA Scan); Lactate Threshold; or Exercise in the Heat may be obtained in the IRB Office.

4.15.2 Genetic Testing

If the study involves genetic testing, issues pertaining to confidentiality of information collected should be addressed. The investigator should state whether or not the genetic information collected about the subject could pose a risk to them (e.g. denial of health insurance because of known predisposition to illness) and whether other genes will be studied in the DNA that may be shown at some point in the future to be related to illness. A description of how blood samples will be coded and stored should be included. An explanation should also be included as to whether or not any of the laboratory results will be made available to subjects, and whether the results will be added the subject's medical record.

The investigator should state whether the specimens collected will be used in future research and whether or not the DNA will have significant therapeutic or commercial value. To protect subject privacy, all information that links the subject’s specimens and DNA to his/her identity must be removed prior to use in any research conducted outside of this specific study so that the sample provided cannot be traced back to the individual subject.
4.15.3 Non-FDA Approved Products

Safety and efficacy concerns should be addressed for studies that involve non-FDA regulated botanical products. Evidence should be provided to suggest that the product being tested is safe for use with humans at the dose level planned for use in this study.

4.15.4 Screening for Pregnancy

To insure that a pregnant woman is not included in research that may be harmful to her or her fetus, procedures to screen for pregnancy should be included. The IRB has approved the following screening procedures: Prior to testing, ask the female subject the start date of her last menstrual cycle. If the participant has not menstruated within the last 14 days, the participant will need to schedule testing to occur within 14 days of the start of her next cycle. The research investigator can make a urine pregnancy test kit available to participants to use as confirmation of pregnancy status. If the pregnancy test indicates a negative result for pregnancy, the test may be conducted. If a positive pregnancy result is indicated, the subject is not eligible to participate in testing.

4.15.5 Internet Research

As Internet research has become more and more common, guidance to assist researchers in developing research protocols in compliance with the ethical standards applied to standard survey and observational research is needed. Research conducted in the virtual world of the Internet is subject to the same IRB review process and human subjects protections as research conducted in the physical world. The main concerns of the IRB for protecting subjects involved in research on the Internet are informed consent, protection of privacy and confidentiality. These concerns pertain to survey and observational research conducted with human participants on the Internet.

4.15.5.1 Informed Consent

The informed consent process is reviewed by the IRB to determine whether appropriate information regarding the study (e.g., study purpose, participant involvement, risks, benefits, confidentiality) is provided to the prospective subjects.

Survey Research

Similar guidelines to obtaining consent for exempt research apply in anonymous, Internet survey research. A statement containing the following information to obtain consent for survey research conducted on the Internet will be reviewed by IRB. The statement should contain the following elements:

- Describe why the study is being conducted.
- State who is being recruited and why they have been chosen.
- Explain what each participant will be asked to do and estimate how long it will take to complete the task.
- Emphasize that participation is voluntary.
- Clarify whether participant's information will be anonymous (no identifiers, including on-line pseudonyms) or confidential. If confidential, indicate whether any information linked to the individual's identity (in the physical or virtual world) will be used.
- Describe incentives/compensation offered or costs that may be incurred.
- Explain added risks associated with privacy violations and strategies developed to reduce the risk of privacy loss or breach of confidentiality.
• Provide contact information including the name of the investigator, department phone number and Email address for inquiries. Include the IRB telephone number and E-mail address (IRB@mail.sdsu.edu) for questions related to their rights as a participant in research.

**Observational Research**

Observational research conducted on the Internet is subject to IRB review. Examples of observational research include monitoring chat room discussions, tracking frequency of Internet use or following consumer patterns of behavior on the Internet. For Internet observational research, the IRB recommends the following procedures to obtain consent:

• Prior to initiating observation or data collection from a particular site, the investigator will contact the domain host, webmaster or equivalent to provide a description of the study and request that information about the study be presented to the community? Should the host agree, study information is presented to the community for discussion? If the community indicates agreement to the host, the researcher is notified of permission to access the site.

• New users that join once the research has begun must be informed of the research in the first welcome message from the domain host, webmaster or equivalent.

• The user/prospective subject should have an opportunity to refuse participation in the observational research study.

**NOTE:** Deception in observational research, where the investigator identity is concealed or falsified on the Internet will be reviewed by the IRB on a case-by-case basis.

4.15.5.2 **Privacy & Confidentiality**

**Survey Research**

Confidentiality and privacy are of particular importance for Internet research, given that information may be stored and accessed for indefinite periods of time. The investigator must assure the Committee that data collected will only be accessible to the investigator.

If the investigator is planning to collect data via the Internet, efforts to enhance participant privacy and reduce risks associated with a breech to confidentiality of subject data must be considered. Within the protocol, the following issues as they pertain to data collection and submission procedures utilizing the Internet should be addressed.

Privacy/Access. A description of procedures planned to protect participant identity when entering and submitting data via the Internet should be included. For example, will the subject have a user name and/or password to gain access to the study site? If so, instructions should be developed for the participant to use when creating a user name or password that enhances protection of her privacy (e.g., not using own name, not sharing password, etc.). Will data be transmitted in encrypted format? In an anonymous survey, will a name-blind survey URL be assigned to each individual survey to guarantee privacy?

Confidentiality of Data. Procedures should be developed to advise a participant on how to prevent another computer user from gaining access to his/her data. This concern focuses on accessing a computer for data entry that is shared with others (e.g. form autocomplete feature, Password Saving feature). The participant should be cautioned to finish the survey in one setting and to shut down the computer after the assessment is completed.

Secure Data Storage. Procedures to not include the participant’s name or identifiers within the database should be incorporated. A coding scheme should be developed to protect subject privacy and confidentiality of data. The
investigator should include a description of how/whether data will be backed-up and kept in a secure location, how long it will be stored and who will have access to the data collected.

A description of systems in place to prevent unauthorized persons (hackers) from accessing the database should be included. For highly sensitive topics, IRB recommends that the subject have the option of printing out a blank copy of the survey and mailing it back to the investigator.

**Observational Research**

Investigators conducting observational research studies on the Internet must consider the perception that its members have regarding the privacy and confidentiality of the information that they disclose. The investigator must also abide by rules that govern the on-line community regarding disclosure of information outside the realm of the group. The investigator must consider the degree to which publication of information disclosed on the website could place subjects at risk. Given the search capabilities of the Internet, even direct, anonymous quotes from subjects could be linked back to the subject with a verbatim search of that direct quote. Investigators must ensure the Committee that all possible precautions have been taken to ensure subject privacy and confidentiality. These guidelines are evolving as Internet research becomes more prevalent. Each research study is unique and poses different ethical issues and challenges for human subjects’ protections. Although Internet research may offer great benefit to science, it is imperative that human participants in these studies are adequately informed of the research and protected from associated risks.

**5.0 Informed Consent Guidance**

**5.1 Consent Purpose**

The Office for Human Research Protections (OHRP) states that “informed consent is one of the primary requirements underpinning research with human subjects; it reflects the basic principle of respect for persons.” Informed consent is the knowing consent of an individual or his/her legally authorized representative, which is obtained without undue inducement or element of force or coercion. Obtaining informed consent does not end with a signature on a piece of paper. It is a process in which the subject receives enough information about a study to make a decision about participating in the research. The subject should have up-to-date information about the requirements of the study during all phases of participation. The process involves reading, understanding and signing an informed consent document as well as discussing the details of study participation with a knowledgeable member of the research team.

**5.2 Consent Process and Procedures**

The following procedures should occur during the informed consent process (45 CFR 46.116):

- The prospective subject is given adequate information to make an informed decision about participating in the proposed study.
- The nature and expectations of the research including risks and benefits is explained to the subject.
- The study is presented in a language that is clear and understandable.
- The subject receives answers to questions that they may have about the study.
- The study is explained in an appropriate setting and with enough time conducive to good decision making.
- The prospective subject comprehends the information and can make a choice about whether they want to participate.
• The prospective subject understands that he/she retains the right to refuse or withdraw from the study at any time without penalty.

• The prospective subject and/or the parent or guardian is given copies of the approved consent form(s).

• The subject (or the parent/guardian when relevant) is provided with a copy of the Research Participant’s Bill of Rights to sign when the research involves medical experimentation.

• Additionally, the investigator must retain the signed copies of the consent document and the Research Participant’s Bill of Rights (when applicable) for three years.

5.3 Alternative Consent Procedures (45 CFR 46.116 (6c))

The IRB may approve a consent procedure that does not include or changes the basic consent requirements or even waive the requirement to obtain informed consent when the following applies and can be documented:

(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.

The IRB may also approve a consent procedure, which does not include or alters the basic consent requirements or even waive the requirement to obtain informed consent when the following applies and can be documented:

(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;

Please note: The regulations referenced do not preempt any applicable Federal, State, or local laws which require additional information to be disclosed in order for informed consent to be legally effective.

5.4 Components of a Consent Form

An informed consent document must include the following: (45 CFR 46.116(a, b)):

• A statement that the subject is being asked to participate in a research study

• The name and degrees of all investigators involved in the study. Indicate the department and institution with which the investigator(s) is affiliated. If the investigator is a student, include the name of the person supervising the research.

• An explanation of what the study is designed to determine or assess using language that is clear to the target audience

• The number of subjects being recruited for this study and the eligibility criteria used to identify prospective participants

• A description of the procedures that the subject will be asked to follow.
• An indication of the location where the research will be conducted and the expected duration of the subject's participation. A specific amount of time the study participation will require of the subjects should be included as well.

• A description of any risks or discomforts the subjects might encounter as a result of participation.

• A description of the provisions made to address these risks or discomforts.

• A statement to describe potential benefits to science and society that may result from this research. A description of any benefits the subjects can expect as a result of participating in the study should be included.

• A description of the extent, if any, to which confidentiality of records identifying the subject will be maintained (including the procedures for using and storing data and who will have access to the data).

• If an incentive is offered to participants, a description of what is being offered and what is required of the subject to obtain the incentive. If the subject is offered a payment, the amount, formula for proration should the subject or investigat or choose to discontinue participation, and when payment will occur must be stated. If an incentive is not offered, a statement that the participant will not be paid to participate in this study must be included.

• Identification of any procedures that are experimental.

• When applicable, appropriate alternative procedures or courses of treatment that might be available or advantageous to them.

• Contact information of study personnel and IRB for the subject should he/she have questions or concerns about participation in the research.

• A statement that the subject's participation in the study is voluntary. A statement should be included that if the subject decides to participate, he/she can withdraw consent and stop participation at any time without penalty or loss of benefits allowed.

• Unless a waiver of documentation of consent has been granted (see “Waiving Requirement to Document Consent” below), a signature and date line for the participant and the investigator (or individual administering the consent form) to complete should be included. The signature lines should be labeled as “subject” and “investigator” (or “study representative if the individual administering the consent form is not the principal investigator.) In addition, space should be included for the subject and the investigator (or individual administering the consent form) to print their name.

5.5 Structure of a Consent Form

The following points must be followed to ensure that the subject understands the nature and purpose of the research in which they are being asked to participate:

• The consent should be written in 6th to 8th grade reading level avoiding technical jargon.

• The consent document should be written in the second person (using the "you" pronoun).

• Legible font size is used based on population targeted (11 or 12 point minimum).

• Use of clear paragraph/section headings to allow the potential subject ease of access to specific study information.

• Double spacing is used between paragraphs.
5.6 Obtaining Parental Permission (45 CFR 46.408)

Parental permission is required when recruiting children or minors as subjects in research. In California, a minor is identified as a person under the age of 18 years. Parental permission must be obtained in advance of enrolling a minor subject into a study. The Informed Consent format is used when developing a Parental Permission form. Text should reflect the activities that the child (and the parent, if they are also considered a subject) will be asked to participate in as a research subject. If the consent form is being developed to obtain parental permission only, the signature line is labeled "Parent or Guardian of Subject." The child subject's name is also printed to indicate the child for whom they are giving permission.

5.7 Obtaining Assent/Dissent from Minors (45 CFR 46.408)

Assent is demonstrated by a child's agreement to participate in research. In California, a child is a person who is under the age of 18 years (unless legally emancipated). It is required that the researcher makes adequate provisions to solicit assent from children unless the IRB waives this requirement. To determine whether the child is able to assent really depends on the child's age and maturity. If the child is considered to be capable of providing assent, whether or not assent is documented is also determined by the IRB. When assent is obtained, an assent form should be constructed that targets the child's level of reading and language use. The assent should include basic information about the study and how the child will be involved. If the parent gives permission for the child to participate and the child assents to participate, then he/she may be enrolled in the study.

5.8 Disclosing a Financial Interest to Subjects

It is generally recognized that a research investigator has an ethical responsibility to disclose a possible conflict of interest to potential research subjects as part of the consent process. The IRB asks investigators to provide information within the protocol to indicate whether they or any other person responsible for the design, conduct, or reporting of this research has an economic interest in, or acts as an officer or a director of any outside entity whose financial interests would reasonably appear to be affected by, the research. If the investigator reports a financial interest with the study sponsor and the conflict can be managed, it is expected that the consent form will adequately inform subjects of the relationship as well as procedures used to minimize the effect the relationship may have on the study. (http://aspe.hhs.gov/sp/coi/refs.htm)

5.9 Documentation of Informed Consent (45 CFR 46.117)

In most cases, informed consent is 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.

Unless the IRB has authorized revisions to the consent procedure, the consent form must include all elements identified within the IRB-approved consent template. The IRB-approved consent form may be read to the subject or to the subject's legally authorized representative in addition to allowing the potential subject an opportunity to review the consent document and ask questions before signing the consent document.

5.10 Waiving Requirement to Document Consent (45 CFR 46.117(c))

The 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. If this is the case, the investigator will ask the subject whether he/she wants to sign the document that links him/her to the
research. The subject's wishes for documentation will dictate whether or not a signed consent form is needed.

(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.

If the IRB approves waiving the requirement for documenting consent, the investigator may be required to provide the subject with a written statement regarding the research.

5.11 Signature of Project Representative

The project representative (principal investigator, study coordinator or designated project representative) also signs the consent to verify that the consent process is complete. When obtaining consent, the setting and timing of explaining the research must be conducive to good decision-making. The project representative should see that everything is done to enhance the prospective subjects' comprehension of the information and their ability to make a choice. The person signing as the project representative should be knowledgeable about the study, able to present information using easily understood terminology, and one who can identify and resolve any remaining questions.

5.12 Consent Translation

Both DHHS regulations (45 CFR 46.116) and FDA regulations (21 CFR 50.20) require that informed consent be obtained in language understandable to the subject (or the subject's legally authorized representative), and documented in writing (46.117 and 50.27, respectively). Non-English speaking subjects must be presented with and sign a consent form that is written in their primary language. The investigator must provide the IRB with a language appropriate translated consent document for review and approval prior to recruiting subjects. It is recommended that the investigator secure IRB-approval of the English consent document prior to translating the consent form. The IRB does not require that a certified translator perform the document translation. However, the IRB does not verify the accuracy of the translated consent document and the investigator must provide assurance to the IRB that the consent or assent form has been adequately translated. The IRB recommends, particularly for full review proposals, that the investigator either hires a certified translator or verifies the translation using a "back-translation procedure." For example, translation of a document to Spanish using the back-translation method involves translation of the English document to a Spanish version. The Spanish version of the document is then converted back to English by another bilingual individual. The original English version is then compared to the English version of the Spanish-translated document for accuracy. If the two documents are comparable, the translation would be considered adequate.

5.13 Special Considerations

5.13.1 Obtaining Consent of Non-English Speaking Persons

The consent document must be written in a language that is understandable to the subject. If the subject does not speak English as their primary language, the consent form must be translated into the subject's primary language. It is recommended to submit the English version of the consent document to the IRB for review prior to submitting the translated document. The Institutional Review Board (IRB) does not verify the accuracy of the translated document. IRB approval of this document for use in subject recruitment will be based on the PI's assurance that the translated document reflects the content of the IRB approved English version of the document.
5.13.2 Obtaining Consent from Cognitively Impaired Persons

If participants are identified as being cognitively impaired, it may be necessary to include additional procedures during the consent process to ensure that the prospective subject understands the information presented about the study. Consider including questions at the end of each section of the consent document to use in assessing participant comprehension of the consent content. This mechanism allows for the investigator to clarify the participant's understanding of specific aspects of the study as the consent process occurs (e.g. After the Description of the Study section, you may ask: *Do you understand what will happen during the testing phase? The training phase?*).

5.13.3 Internet Research

The consent form should explain added risks associated with privacy violations and strategies developed to reduce the risk of privacy loss or breach of confidentiality. See the section entitled *Internet Research* for more information on this topic.

5.13.4 Deception or Incomplete Disclosure

In studies involving deception or incomplete disclosure, information about the details of the study hypothesis or research question to subjects may be abbreviated or withheld during the consent process. However, subjects should be provided with enough general information about the study or experiment to understand and make an informed decision about whether or not they want to complete the study tasks or expose themselves to potential risks involved in study participation. Subjects should be debriefed about the true nature and purpose of the study after their participation has ended.

5.13.5 Debriefing

In behavioral research involving deception, the IRB requires that subjects be debriefed after their participation. The debriefing statement should be presented both orally and in writing. Debriefing procedures should include a written statement that will be summarized and then given to subjects to take home to read in more detail if they choose. Along with a description of the deception involved and an explanation about the true purpose of the research, include a statement to inform subjects of their right to withdraw their data from the study if they feel upset or uncomfortable with the deception involved. Referral information should also be provided to the subject should participation in this study raise personal concerns that he/she would like to discuss with a clinical professional.

5.13.6 Obtaining Consent in Exempt Research

A signed consent is generally not required for exempt research. The investigator will provide adequate information about the research to potential subjects so that an informed decision can be made. The investigator can deliver this information verbally or both verbally and in writing. The appropriate mode of delivery will depend on administration procedures. The consent statement will include the information needed for a participant to make a decision regarding participation. The statement will be written in a language easily understood by the target audience.

The consent form should contain all applicable components from 5.4 above.

5.13.7 Consent Forms with Collaborating Institutions

Investigators who have a joint appointment (e.g., joint doctoral students) may be required to obtain IRB approval from all institutions with which they are affiliated. The IRB encourages investigators to work with each institution's
IRB toward achieving a consent document that meets with both institutions’ requirement. This is preferred to having two or more approved consent documents that are used to document informed consent from each subject.

5.14 Consent Form Templates

Templates of consent forms for the following can be found at http://www.csudh.edu/RF/Forms.htm:

1. Form D for general consent
2. Form D-1 for use with projects that have minimal risk
3. Form D-2 for use with projects that have mild to moderate risk, with the subject’s identity known, and with audio or videotaping
4. Form D-3 for use with projects that involve considerable risk to the subjects
5. Form E for parental permission for child to participate in research
6. Form F for assent from child

6.0 Commencing Research

6.1 Investigator Responsibility

Protecting the rights and welfare of the research subject is a shared responsibility of the IRB and the investigator. Ultimately, the investigator is responsible for the conduct of the study. This includes the application and monitoring of ethical practices, compliance with state/federal regulations and institutional practices, and supervision/training of research staff. Individuals conducting research under the auspices of the institution are required to comply with all federal, state and institutional regulations and policies regulations for the protection of human research subjects. Investigators will document their understanding of his/her responsibilities during on-line IRB application process.

6.2 Faculty Advisor’s Responsibility when Supervising Student Research

Student initiated research involving human subjects, whether dissertation, thesis or other research projects, must be supervised by an authorized faculty member to insure the compliance with procedures and regulations relating to the protection of human subjects. Supervising faculty is responsible for the following aspects of the student's involvement in research:

- Meeting with the student investigator to monitor the study progress.
- Being available to the student investigator to supervise and to address problems should they arise.
- Overseeing the prompt reporting of any significant or untoward adverse effects within 5 days of occurrence.
- Arrangement for an alternate faculty sponsor to assume these duties when unavailable (vacation or sabbatical).
- Monitoring of the research activity to insure that the protocol approved by the IRB is followed.
6.3 Institutional Responsibilities

The institution’s assurance with the U.S. Department of Health and Human Services identifies responsibilities of the institution and that of the research investigator and the IRB related to human subjects protections issues. The assurance authorizes the IRB to perform as the Institutional Review Board for this campus.

6.4 Modifications & New Findings

Federal regulations require that any revision to previously approved research involving human subjects receive IRB approval in advance of implementation except when necessary to eliminate apparent immediate hazards to the subject (45 CFR 46.103 (b)(4)(iii)). A modification is defined by the IRB as a change that does not alter the overall character or purpose of the original project. Minor changes that do not adversely alter the overall risk-benefit profile of the study may receive an expedited review. The convened committee reviews proposed changes that may affect the willingness of enrolled subjects to continue participation and/or increase the risk to research subjects.

Investigators may request to modify their protocol. Within the modification request, the researcher is asked to provide a complete description of and rationale for the proposed modification and to address the effects of the modification on risks, benefits, management of risks, and informed consent. Any new findings in the literature that may influence the study procedures, risks or benefits must also be reported to the IRB.

Changes to the consent document to inform subjects of new findings, changes in procedures, risks and benefits to study participation must also be approved by the IRB. An IRB approval stamp will be applied to the revised and approved consent form when the modification approval is completed. Procedures used to inform and document consent of previously enrolled subjects affected by the modification should be addressed.

6.5 Adverse Event Reporting

The principal investigator of an IRB approved protocol must report any serious or unexpected adverse events experienced by a research subject that are associated with the study procedures. Any undesirable experience associated with the research may also be considered an adverse event. If the event is considered serious or unexpected, the investigator is required to report the event for IRB review (e.g. Subject experiences recurring problems, unanticipated side effects and/or death). Failure to report an adverse or unanticipated event to the IRB may result in temporary or permanent suspension of the protocol approval.

6.6 Continuing Review of Approved Protocols (45 CFR 46.109(c))

Research projects must be reviewed at least annually. The initial IRB approval expires one year following its award, unless otherwise stipulated by the committee. Determination for more frequent review is based on the degree of risk associated with participation and/or the involvement of subjects that require additional protections as defined by the Department of Health and Human Services.

A continuation of approval is needed if: 1) subject recruitment and/or data collection is continuing or 2) data is being analyzed that was collected on this project. A final report is necessary if all procedures are completed that involve human subjects (e.g., recruitment, data collection and analysis). To apply for continuation of approval or to indicate a final report, the investigator must complete a Continuation Report. Research that was initially reviewed by the convened committee will receive continuing review by the convened committee unless identified as not exceeding a minimal level of risk at the time of its initial review. Request for continued approval should be submitted in accordance with the appropriate deadline date as posted on the IRB schedule.
6.7 Site Monitoring

Continuing review may also involve a site visit by an IRB representative to the research facility. The goal of the site visit is to assess whether the protocol is being carried out as approved by the IRB. A secondary goal is to provide assistance to the investigator and key personnel, as needed, to increase understanding of the ethical principles associated with human subjects’ protections and federal regulations. Specific areas targeted for review of the protocol include: recruitment methods and materials; measures; eligibility criteria; compensation; informed consent procedures, IRB records; data management and record keeping. Relevant study materials (e.g., correspondence, recruitment materials, subject files, measures, etc.) are made available for review during the site visit (as required by 45 CFR 46.109(e)). The IRB may recommend a site visit for research studies that involve vulnerable populations, a longitudinal design and/or procedures exceeding minimal risk. A site visit may also occur if a serious adverse event has occurred or a complaint has been registered.

6.8 Suspension or Termination of Approval

The IRB may suspend or terminate the approval of research that is not being conducted in accordance with the requirements set forth by the committee or that has been associated with unexpected serious harm to subjects (45 CFR 46.109(a)).