

TANEY COUNTY HEALTH DEPARTMENT

IRB CHECKLIST – INITIAL REVIEW



HRPP # _____

Date:		Name of Reviewer:	
Reviewer Type: <input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Expedited			
Type of Project:		Name of Agencies Lead Investigator:	
Name of Principal Investigator (if different from above):		Name of Lead IRB:	
REVIEWER RECOMMENDATIONS SUMMARY			
Level of Risk (please check one): <input type="checkbox"/> Minimal Risk (the probability and magnitude of harm or discomfort are not greater than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests) <input type="checkbox"/> Greater than minimal risk		Device Category (please check one): <input type="checkbox"/> Not Applicable <input type="checkbox"/> Significant Risk <input type="checkbox"/> Non-significant Risk	
Child Category (see also Attachment 1): <input type="checkbox"/> Not Applicable <input type="checkbox"/> Cat. 1 (45 CFR 46.404) – minimal risk w/prospect of direct benefit <input type="checkbox"/> Cat. 2 (45 CFR 46.405) – greater than minimal risk w/prospect of direct benefit		Recommended IRB Action (check one): <input type="checkbox"/> Approve as submitted <input type="checkbox"/> Modifications required to secure approval <input type="checkbox"/> Defer for the reasons described below <input type="checkbox"/> Table for the reasons described below <input type="checkbox"/> Disapprove for the reasons described below <input type="checkbox"/> Suspend for the reasons described below <input type="checkbox"/> Terminate for the reasons described below	
Recommended Total Enrollment Number (upper limit):		Comments or Concerns:	
Continuing Review Frequency (check one): <input type="checkbox"/> 12 months <input type="checkbox"/> 6 months <input type="checkbox"/> Other: _____		Type of Review (check one): <input type="checkbox"/> Expedited reviewer acting on behalf of the IRB Category No.: _____ <input type="checkbox"/> Recommendations to convened IRB by expedited reviewer <input type="checkbox"/> Recommendations by convened IRB	
Signature of Reviewer:			Date:

PART A – BACKGROUND INFORMATION

1. Please verify that the investigator has provided adequate background information for the proposed research.

	Yes	No	N/A
a. Agency personnel have completed human subject protection training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Lead researcher is appropriate to serve as Principal Investigator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Sponsorship of the research is clear and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Purpose of the research is clear and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Collaborative relationships are clear and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Specimen banking procedures are clear and adequately discussed in protocol and consent document	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. DNA testing procedures are clear and adequately discussed in protocol and consent document	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Procedures for use of FDA-regulated products are clear and IND/IDE information is adequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Host country approval obtained and documentation received (If necessary)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. IRB approval from collaborating institutions obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments or Concerns:

PART B – REGULATORY CRITERIA FOR APPROVALS

Regulatory Criteria: In order to approve research, the IRB must have sufficient information to determine that the eight criteria below have been satisfied. These criteria include: (1) risks are minimized through sound research design; (2) risks are reasonable relative to anticipated benefits; (3) selection of subjects is equitable; (4) informed consent will be obtained; (5) informed consent will be documented; (6) privacy and confidentiality provisions are adequate; (7) data safety monitoring is adequate; (8) appropriate safeguards are included for vulnerable subjects.

1. Risks Are Minimized & Reasonable in Relation to Benefits *(please note and comment below as to whether the following elements are adequately addressed):*

Risks include physical, psychological, emotional and social harms (e.g., stigmatization, loss of service, loss of employment, etc.) Examine the research plan, including research design and methodology, to determine that there are no flaws that would place subjects at unnecessary risk. **Risk/benefit analysis** evaluates the most current information about the risk and benefits of the interventions involved in the research, in addition to information about the reliability of this information. Consider only those risks that result from the research rather than the long-range effects (e.g., public policy implications) of applying the knowledge gained in the research.

	Yes	No	N/A
a. All risks to subjects are clearly and accurately identified and considered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Risks to others (e.g., relatives, friends) are accurately identified and considered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Risks are minimized through sound research design	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Research personnel are qualified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Anticipated benefits to subject and importance of knowledge to be gained are clearly and accurately identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Risks are reasonable in relation to anticipated benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments or Concerns:

2. Recruitment and Selection of Subjects Are Equitable (please note and comment below as to whether the following elements are adequately addressed):			
	Yes	No	
a. Active duty military representation is appropriate (if involved, please complete Question 7)			
b. Minority/ethnic representation is appropriate			
c. Gender representation is appropriate			
d. Recruitment methods and advertising materials are non-coercive and appropriate			
e. Selection of subjects is equitable			
f. Children; pregnant women, fetuses, or, neonates; or prisoners are involved (If Yes, please complete Question 7)			
Comments for Concerns:			
3. Informed Consent Is Obtained and Documented (please note and comment below as to whether the following elements are adequately addressed):			
	Yes	No	N/A
a. Informed consent process is described adequately (if informed consent is waived, complete Part C, Waiver of Informed Consent)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Circumstances of consent (e.g., timing, place, person obtaining consent) minimize coercion or undue influence (if vulnerable subjects are involved, complete Question 7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. For greater than minimal risk research, the signature on the informed consent document will be performed in the presence of a witness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Informed consent will be documented by obtaining a written consent form that is signed and dated (if documentation is waived, complete Part C, Waiver of Informed Consent)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The informed consent document does not include exculpatory language (i.e., waiving or appearing to waive any of the subject's legal rights, or releasing or appearing to release the investigator, the sponsor, the institution or its agents from liability for negligence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The informed consent document does not include complex language (e.g., technical terms or un-defined medical terms)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The informed consent document does not include coercive language (e.g., use of first person)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Appropriate translated and back-translated consent forms are available for anticipated non-English speaking subjects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. The following 8 required elements below are included:			
1) Statement that study involves research and includes including the purpose, duration, procedures, identification of experimental procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Disclosure of reasonably foreseeable risks or discomforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Description of any benefits to subjects or others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Disclosure of appropriate alternative procedures or courses of treatment, if any, that might be advantageous to subjects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Description of the extent to which confidentiality of records will be maintained (including that records may be inspected by monitors, the Study Sponsor, or Federal funding agency).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) If research is more than minimal risk, whether any compensation or medical treatments are available for injury with description.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Three contacts: study information (PI's name & phone number), research related injury, subjects' rights (IRB)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Voluntary participation, including "refusing to participate or withdrawing from the research involve no penalty or loss of benefits to which the subject is otherwise entitled"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

j. The following additional elements as appropriate (i.e., greater than minimal risk studies) are include:			
	Yes	No	N/A
1) Unforeseeable risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Investigator-Initiated Termination of Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Additional Costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Early Withdrawal/Procedures for Termination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Significant New Findings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Approximate Number of Subjects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments or Concerns:			
<p>4. Privacy & Confidentiality Protections Are Adequate (please note and comment below as to whether the following elements are adequately addressed):</p> <p>Considerations: Consider the nature, probability, and magnitude of harms that would be likely to result from a disclosure of collected information outside the research. Evaluate the effectiveness of proposed anonymizing techniques, coding systems, encryption methods, storage facilities, access limitations, and other relevant factors in determining the adequacy of confidentiality protections. Sensitive information includes, but is not limited to, child abuse, violence, some infectious diseases, conditions affecting insurability, compensation or litigation, etc. Research records are not medical records and can be subpoenaed.</p>			
	Yes	No	N/A
a. Methods for obtaining, recording, and coding of data and/or samples (e.g., saliva, blood, tissue) are described and satisfactory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Storage of data and/or samples is described and satisfactory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Procedures for sharing (including electronic transmission) of data and/or samples are described and satisfactory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Provisions protecting the privacy of subjects and the confidentiality of data/records are adequate and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Plans for de-identification of data at completion of study or rationale for not de-identifying data are adequate and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Plans for storage and retention or records are described and satisfactory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Plans for future use and disallowance are adequate and satisfactory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments or Concerns:			

5. Safety Monitoring Is Adequate (please note and comment below as to whether the following elements are adequately addressed):

The IRB must determine that, where appropriate, the research plan makes adequate provision for monitoring the data to protect the safety of subjects. For research in which risks are substantial, a detailed description of the data and safety monitoring plan should be submitted as part of the proposal. This plan should contain reporting adverse events procedures.

	Yes	No	N/A
a. Independent medical monitor has been identified by name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Independent medical monitor responsibilities are clearly described and appropriate (e.g., assess subject recruitment, subject enrollment, data collection, or data storage and analysis.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Internal and/or external data safety monitoring will occur	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. A Data Safety Monitoring Board or Data Monitoring Committee has been established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Overall safety monitoring is adequate and appropriate (e.g., stopping criteria for FDA-regulated research)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments or Concerns:

6. Please verify that safeguards for vulnerable subjects are adequate:

- Military personnel** (complete **Question 7-A**)
- Adults with Impaired Capacity for Decision-Making** (complete **Question 7-B**)
- Other vulnerable adults** (e.g., socially or economically disadvantaged, complete **Question 7-C**)
- Children** (complete **Attachment 1**, see 45 CFR Part 46 Subpart D)
- Prisoners** (complete **Attachment 2**, see 45 CFR Part 46 Subpart C)
- Pregnant Women and Fetuses** (complete **Attachment 3**, see 45 CFR Part 46 Subpart B)
- Neonates** (complete **Attachment 3**, see 45 CFR Part 46 Subpart B)
- N/A – no vulnerable subjects** (skip to Question 13 below)

A. Military Personnel	Yes	No	N/A
1. Deployment of military personnel has been considered and contingency planning is appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Approval from appropriate supervisors has been obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. For research involving more than minimal risk, procedures to prevent influence by unit officers and noncommissioned officers (NCOs) on the decisions of their subordinates to participate or not participate. (e.g., unit officers and NCOs are not present during recruitment and consent process)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. When a percentage of the unit is being recruited to participate as a group, an ombudsman (independent from research and unit) will be present to monitor the recruitment briefings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments or Concerns:

B. Adults with Impaired Capacity for Decision-Making	Yes	No	N/A
1. Procedures to assess subjects' decisional capacity and understanding of the research are adequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Procedures for obtaining consent from legally authorized representative are adequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Protections for subjects' with impaired decision making are adequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments and Concerns:

C. Other Vulnerable Subjects	Yes	No	N/A
Procedures to address subjects' vulnerabilities are included, appropriate, and adequate (e.g., provisions for coercion and operational commitments)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments or Concerns:			

PART C – WAIVER OF CONSENT OR DOCUMENTATION OF CONSENT

Note: These criteria also apply to waiver of parental permission or waiver of child assent. Waiver of informed consent, waiver of parental permission, and waiver of documentation are **NOT permitted under FDA regulations** or for the involvement in research of nonviable neonates.

Pursuant to 10 USC 980, waiver of informed consent is **NOT permitted for "research involving experimental subjects."**

7. Criteria for Waiver of Consent (or Permission or Assent) *(please verify that the criteria have been satisfied.)*

	Yes	No	N/A
a. The research involves no more than minimal risk; AND			
b. Waiver/alteration will not adversely affect rights and welfare of subjects; AND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The research could not practicably be conducted without waiver/alteration; AND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Whenever appropriate, subjects will be provided additional pertinent information after participation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments or Concerns:

8. Criteria for Waiver of Documentation Only *(please verify that the criteria have been satisfied.)*

	Yes	No	N/A
a. The only record linking the subject to the research would be the consent form, and the principal risk to the subject would be potential harm resulting from breach of confidentiality; OR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The research presents no more than minimal risk of harm to subjects and involves no procedures for which written consent is not normally required outside of the research context	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments or Concerns:

PART D – DOCUMENTATION REVIEWED

9. Please check if you have reviewed the following additional documentation:

I have personally reviewed:	Yes	No	N/A
a. Investigator assurance (signed by all investigators)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Privacy Act Statement (applicable if volunteers are U.S. citizens or legally admitted foreign nations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Investigator <i>curriculum vitae</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Medical monitor <i>curriculum vitae</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Protocol (approved by IRB)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Clinical investigator’s brochure, package insert, PDR monograph or other labeling materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Informed consent, parental permission, and/or child assent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Forms for non-English speakers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Comprehension assessment instruments, i.e., quizzes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Foreign language translations and back translations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Advertisements, announcements, letters, or other recruiting materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Scales, survey instruments, questionnaires, interview scripts, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Case report forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Federal grant application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Conflict of interest declarations for all researchers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Host country approvals (if necessary)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Collaborating institutions’ IRB approvals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments or Concerns:			

Revised 9/15