SUBMISSION TO AND REVIEW OF AMENDMENTS BY THE INSTITUTIONAL REVIEW BOARD

DESCRIPTION

Any amendments to an approved research project, such as modifications to the inclusion/exclusion criteria, study population, study procedures or consent process, requested by the investigator or sponsor must be approved by the Institutional Review Board (IRB) before the modifications are implemented. Such amendments are also known as protocol modifications, revisions, or changes.

General Provisions

Modifications in approved research during the period for which approval has been given may not be initiated without prior IRB review (convened IRB, expedited review, or exempt, as appropriate) and approval, except where necessary to eliminate apparent immediate hazards to human participants.

Upon receipt of a modification, the IRB Chair or designee shall determine if the modification meets the criteria for minimal risk. The criteria for approval of modifications to approved research are the same as those for initial review (see Human Research Protection Program HRPP Procedure 303: Procedures Followed for Conducting Initial Full Board Protocol Review). If the modification represents more than a minimal risk to participants, it must be reviewed and approved at a convened meeting of the IRB. Minor modifications involving no more than minimal risk to the participants shall be reviewed in accordance with the expedited review procedure.

Definitions of Minor Modifications

Minor modifications to previously approved research are those that meet all of the following criteria:

- Involve the addition of no more than minimal risk to participants, and
- All added procedures are eligible for initial review using the expedited procedure if considered independently of the research.

Examples of minor modifications include, but are not limited to:

- Addition of research activities that would be considered exempt or expedited if considered independent from the main research protocol;
- Minor increases or decreases in the number of participants; and
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- Modifications in remuneration to participants;
- Modifications to improve the clarity of statements in the informed consent form, research privacy form, or protocol to correct typographical errors, provided that such a change does not alter the content or intent of the statement.

Amendments to Exempt Research

Minor modifications to exempt studies do not require IRB review and approval unless they may change the study’s eligibility for exemption. Modifications that have the potential to change the nature of the research and, therefore, the study’s eligibility for exemption do require review by IRB prior to implementation of the modification.

Examples of minor modifications that can be implemented without review:
- Addition or removal of study personnel other than the Principal Investigator.
- Minor revisions to recruitment materials and methods. For example, a change to the phone number, or the addition of a newspaper ad when using similar language as an already approved flyer.
- Minor revisions to survey, interview, or focus group instruments that do not fall outside the scope of the original approved instruments. For example, wordsmithing, addition of clarifying questions, addition of very similar questions to those previously approved, or deletion of questions.

Examples of substantive modifications that require review:
- Change in Principal Investigator.
- Change in funding source.
- Change to study personnel potential conflicts of interests related to the research.
- Change to study purpose or procedures. For example, adding a survey on a different topic than previously approved or collection of data falling outside the parameters of the data collection previously approved.
- Changes to study population targeted for recruitment. For example, adding a new population or substantively revising the inclusion/exclusion criteria for the current population.

RESPONSIBILITY

The Human Protection Administrator (HPA) is responsible for providing the IRB Chair with all the tools and resources needed to complete the initial review of the modification.

The IRB Chair or designee is responsible for providing IRB Members adequate submission review training and ongoing guidance and for selecting one primary and one secondary reviewer.
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with the relevant expertise to review and make necessary recommendations on approval decisions to the IRB. If the IRB Chair or designee cannot select primary and secondary reviewers with the relevant expertise, the IRB Chair or designee shall defer the review to another IRB with primary and secondary reviewers with the relevant expertise or obtain consultation for that expertise.

Primary and secondary reviewers are responsible for conducting an in-depth review of all materials. All other IRB Members are responsible for reviewing all materials in enough depth to be prepared to discuss the information at the convened meeting. The IRB Chair or designee is responsible for determining expedited review or review by the convened IRB of the modification. The IRB Chair or designee and the HPA are responsible for checking each item on the agenda to determine whether a consultant is needed for additional expertise, such as scientific or scholarly expertise in a particular field, expertise regarding the local context or knowledge, or experience in working with vulnerable populations. The IRB Member (primary or secondary reviewer) is responsible for presenting the modification at the next convened meeting.

**PROCESS**

HRPP staff will conduct the initial review of each modification prior to providing the submission to the designated IRB Member for review. If it is not clear whether or not a modification requires review by the convened IRB, the Chair or designee will make that determination. Additional information may be requested from the investigator in order to facilitate the review process.

Following completion of review, the IRB may approve the modification, approve the modification with conditions, determine whether the review type or approval expiration date should be changed, defer consideration of the modification with a request for additional
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information, or may disapprove the modification. The results of the IRB’s actions will be promptly communicated in writing to the Principal Investigator (PI).

A modification approval letter will be provided to the PI once approval has been granted by the IRB chair, designated Reviewer, or full IRB. If the modification required changes to the informed consent document(s) the following will be required of the PI for:

- Actively enrolling protocols, no current enrollment - the stamped copy of the updated clean consent will be used when enrolling new participants;
- Actively enrolling protocols, some participants already enrolled - the IRB approved copy of the updated clean consent will be used when enrolling new participants; the IRB approved copy of the updated redlined consent will be used when reconsenting currently enrolled participants; and
- Follow-up of currently enrolled participants only - the IRB approved copy of the updated bolded consent will be used when reconsenting currently enrolled participants

If other materials to be given to participants were updated with the modification, these materials will be distributed to the appropriate participants (currently enrolled and/or new), as it affects that population.

For review of modifications to previously approved research by a convened IRB, when they are scheduled to attend a meeting, all Members (including alternate Members), shall receive and review all modified documents.

If the IRB determines that there are significant new findings arising from the review process that might relate to participants’ willingness to continue participation that information shall be provided to participants.

Researchers must report to the IRB premature completion of a study; all changes in approved research that are initiated without IRB approval to eliminate apparent immediate hazards to the participant must be:

- Promptly (no longer than within 30 days) reported to the IRB.
- Reviewed by the IRB to determine whether each change was consistent with ensuring the participants’ continued welfare.
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When following Department of Health and Human Services (DHHS) regulations, at least one IRB Member is provided and reviews:

- The DHHS-approved sample consent document (when one exists).
- The complete DHHS-approved protocol (when one exists).
- Any relevant grant applications.

APPLICABLE REGULATIONS AND GUIDELINES

45 CFR 46.101
45 CFR 46.102
45 CFR 46.109
45 CFR 46.110
45 CFR 46.111
21 CFR 56.109

HRPP Policy III.01 Review by the Institutional Review Board of Human Subjects Research
HRPP Policy III.02 Categories of Review for Human Subjects’ Research

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<tr>
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<td>07/2009</td>
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<td>Combine procedures 312/313/314. Create Policy section to describe Modifications</td>
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<td>Revisions for clarification</td>
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<td>1/2017</td>
<td>M. Linke</td>
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Date Adopted: March 2005

Signature: signed copy on file