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What is the purpose of this manual?

This document is designed to guide you through policies and procedures related to the conduct of human research that are specific to this organization.

General information regarding human research protections and relevant federal regulations and guidance is incorporated into the required human protections training. For additional information see below: “What training does my staff and I need in order to conduct human research?”

What is Human Research?

“POLICY: Human Research Protection Program (HRP-010)” defines the activities that this organization considers to be “Human Research.” To assess whether an activity is human research use “WORKSHEET: Human Research (HRP-421).” “INVESTIGATOR GUIDANCE: Is it Human Subject Research? (HRP-821) is also a helpful tool to decipher between quality improvement, classroom projects, program evaluation, or human subject research projects. Use these documents for guidance, keeping in mind that the IRB makes the ultimate determination in questionable cases as to whether an activity constitutes human research subject to IRB oversight.

You are responsible not to conduct human research without prior IRB review and approval. If you have questions about whether an activity is human research, contact the chsirb@okstate.edu who will provide you with a determination.

NOTE: CHS policy charges the IRB with determining whether an activity conducted or supported by OSU CHS faculty, staff, or students, is research involving human subjects. OSU CHS policy does not authorize investigators to make a determination of exemption for their own.
What is the Human Research Protection Program?

A Human Research Protection Program or HRPP is a university-wide system to protect human subjects in research. It is described in “POLICY: Human Research Protection Program (HRP-010).”

What training does my staff and I need to conduct human research?

All members of the research team involved in the conducting research with study participants or who are directly involved in using study participants' identifiable private information during the course of research are required to take training.

Study personnel must complete the Collaborative Institutional Training Initiative (CITI) human subjects online training program. The CITI site can be accessed at www.citiprogram.org. Training requirement may vary, based on the specific study activities.

On a case-by-case basis, the IRB can approve alternative training or accept the training received elsewhere.

Training is valid for a three-year period, after which time the training must be repeated.

This section describes the training requirements imposed by the IRB. You may have additional training imposed by other federal, state, or organizational policies.

What are the obligations of individuals who conduct human research?

The obligations of individuals who conduct human research can be found in these documents:

- POLICY: Investigator Obligations (HRP-070)
- POLICY: Prompt Reporting Requirements (HRP-071)
- INVESTIGATOR GUIDANCE: Informed Consent (HRP-802)
- INVESTIGATOR GUIDANCE: Documentation of Informed Consent (HRP-803)
- INVESTIGATOR GUIDANCE: Additional DOD Obligations (HRP-810)
- INVESTIGATOR GUIDANCE: Additional DOE Obligations (HRP-811)
- INVESTIGATOR GUIDANCE: Additional DOJ Obligations (HRP-812)
- INVESTIGATOR GUIDANCE: Additional ED Obligations (HRP-813)
- INVESTIGATOR GUIDANCE: Additional EPA Obligations (HRP-814)
- INVESTIGATOR GUIDANCE: Additional FDA Obligations (HRP-815)
- INVESTIGATOR GUIDANCE: Additional ICH-GCP Obligations (HRP-816)
- INVESTIGATOR GUIDANCE: Additional ISO 14155 Obligations (HRP-817)
- INVESTIGATOR GUIDANCE: Additional HHS Obligations (HRP-818)

How do I submit new human research to the IRB?

How do I write an Investigator Protocol?

You may use “TEMPLATE PROTOCOL (HRP-504)” as a starting point for drafting a new Investigator Protocol, and reference the instructions in italic text for the information the IRB looks for when reviewing research. You may use any format or style as long as the required information is included.

How do I create a consent document?

You may use “TEMPLATE Consent (HRP-500)” or “TEMPLATE Consent for Minimal Risk Research (HRP-501)” to create a consent document. For Exempt studies, the "TEMPLATE Exempt Information Sheet" may be used. You may use any format or style as long as the required information is included.

Most consent documents, summaries, and consent scripts must include the required and additional appropriate disclosures in Section 4 of “WORKSHEET: Criteria for Approval (HRP-400).”

Date the revisions of your consent documents to ensure that you use the most recent version approved by the IRB.

What are the different regulatory classifications that research activities may fall under?

Submitted activities may fall under one of the following four regulatory classifications:

- Not “Human Research”: Activities that do not meet the organizational definition of “Human Research” do not fall under IRB oversight. The criteria for whether an activity is human research is in “WORKSHEET: Human Research (HRP-421)” Contact chsirb@okstate.edu if you are uncertain whether an activity is human research. If you intend to publish in a journal that requires an IRB determination memo, approach the IRB prior to your research.

- “Human research that does not engage the institution”: Some human research requires review by an IRB but is not the responsibility of the university. The criteria for this determination is in “WORKSHEET: Engagement (HRP-422)” Contact chsirb@okstate.edu if you are uncertain whether human research is the responsibility of the university.

- Exempt: Certain categories of human research may be exempt from regulation but require IRB review. It is the responsibility of the university, not the investigator, to determine whether human research is exempt from IRB review. “WORKSHEET: Exemption (HRP-423)” for the categories of research that may be exempt.

- Review Using the Expedited Procedure: Certain categories of human research are not exempt but may qualify for review using the expedited procedure, meaning that the project may be approved by a single designated IRB reviewer, rather than the convened board. Review the “WORKSHEET: Expedited Review (HRP-424)” for the categories of research that may be reviewed using the expedited procedure.
• Review by the Convened IRB: Non-exempt human research that does not qualify for review using the expedited procedure must be reviewed by the convened IRB.

**What are the decisions the IRB can make when reviewing proposed research?**

The IRB may approve research, require modifications to the research to secure approval, table research, or disapprove research:

- **Approve:** Made when all criteria for approval are met. See “How does the IRB decide whether to approve human research?” below.

- **Conditionally Approve:** Made when IRB members require specific modifications to the research before approval can be finalized. The IRB describes the required modifications and their reasons and gives the investigator an opportunity to respond to the IRB in person or in writing.

- **Defer:** Made when the IRB determines that the board is unable to approve research and the IRB suggests modifications that might make the research approvable. The IRB describes the recommended modifications and their reasons and gives the investigator an opportunity to respond to the IRB in person or in writing.

- **Disapprove:** Made when the IRB determines that it is unable to approve research and the IRB cannot describe specific modifications that might make the research approvable. The IRB describes its reasons for this decision and gives the investigator an opportunity to respond to the IRB in person or in writing.

**How does the IRB decide whether to approve human research?**

The criteria for IRB approval for exempt research can be found in the “**WORKSHEET: Exemption (HRP-423)**” for exempt human research and for non-exempt research in “**WORKSHEET: Criteria for Approval (HRP-400)**.” The latter worksheet references other checklists that might be relevant. All checklists and worksheets can be found on the IRB Web site.

These checklists are used by the IRB for initial review, continuing review, and review of modifications to previously approved human research.

**What will happen after IRB review?**

The IRB will provide you with a written decision indicating that the IRB has approved the human research, conditionally approved the human research, or has deferred or disapproved the human research.

- **If the IRB has approved the human research:** The human research may commence once all other organizational approvals have been met. IRB approval is usually good for a limited period of time which is noted in the approval letter.
• If the IRB conditionally approved the human research and you accept the modifications: Make the requested modifications and submit them to the IRB. If all requested modifications are made, the IRB will issue a final approval. Research cannot commence until this final approval is received. If you do not accept the modifications, write up your response and submit it to the IRB.

• If the IRB deferred the human research: The IRB will provide a statement of the reasons for deferral and suggestions to make the study approvable and give you an opportunity to respond in writing. In most cases if the IRB’s reasons for the deferral are addressed in a modification, the human research can be approved

• If the IRB disapproved the human research: The IRB will provide a statement of the reasons for disapproval and give you an opportunity to respond in writing.

In all cases, you have the right to address your concerns to the IRB directly at an IRB meeting.

How do I submit continuing review?


If the continuing review progress report is not received by the date requested in the approval letter, all research activities must be suspended, and you will be restricted from submitting new human research until the completed report has been received.

How do I submit a modification?


How do I close out a study?


How long do I keep records? Information can be found in the “INVESTIGATOR GUIDANCE: Investigator Obligations (HRP-800)” and Guidance – Investigator Requirements for Retaining Research Data.

What if I need to use an unapproved drug, biologic, or device and there is no time for IRB review? Contact chsirb@okstate.edu to discuss the situation. If there is no time to make this contact, review the worksheet below that is most relevant, follow the requirements, and contact the IRB office or IRB chair by the close of the next business day:

• WORKSHEET: Emergency Use Drugs and Biologics (HRP-451)
• WORKSHEET: Emergency Use Devices (HRP-452)
• WORKSHEET: Compassionate Use Devices (HRP-453)
If you are using an unapproved drug or biologic, use the “TEMPLATE: Consent for Emergency Use (HRP-502)” to prepare your consent document.

FDA considers emergency use of an unapproved drug or biologic to be research and the individual getting the test article to be a subject. FDA does not consider emergency use of an unapproved device to be research. However, FDA guidance recommends following similar rules.

Individuals getting an unapproved drug, biologic, or device without prior IRB review are not a “subject” as defined by HHS and his or her results cannot be included in prospective “research” as that term is defined by HHS.

**How do I get additional information and answers to questions?**

This document, policies and procedures, guidance, tools and definitions for the Human Research Protection Program are available on the IRB Web Site at https://medicine.okstate.edu/research/human-subjects-research/index.html.