

### Common IRB Definitions

**Adverse event (AE):** Adverse event means any untoward medical occurrence associated with the use of a drug or device in humans, whether or not considered drug or device related (21 CFR 312.32(a)).

**Assent** the expression of approval or agreement from a minor to participate in a research project.

**Case Report/Study** is understood to mean the collection and presentation of detailed information about three or less particular patients ( $n < 3$ ), frequently including the accounts of patients themselves, that does not include any interventions by the investigator(s). A form of qualitative descriptive research, the case study looks intensely at three or less patients, drawing conclusions only about three or less patients and only in that specific context. It may involve collecting data about patient(s) using patient and direct observations, interviews, examinations of records, and collections of writing samples. Case reports/studies generally involve the description of medical treatment in three or less patient(s) with unique treatment, disease course, or outcome(s) based on the retrospective or prospective review of medical records or they can involve a description of a unique diagnostic finding or uncommon presentation. Case studies may also involve either retrospective or prospective study.

**ClinicalTrials.gov** ClinicalTrials.gov is a Web-based resource that provides patients, their family members, health care professionals, researchers, and the public with easy access to information on publicly and privately supported clinical studies on a wide range of diseases and conditions. ClinicalTrials.gov contains information about medical studies in human volunteers. Most of the records on ClinicalTrials.gov describe clinical trials. ClinicalTrials.gov also contains records describing observational studies and programs providing access to investigational drugs outside of clinical trials (expanded access).

**Collaborative Institutional Training Initiative (CITI)** a training program dedicated to promoting the public's trust in the research enterprise by providing high quality, peer-reviewed, web-based educational courses in research, ethics, regulatory oversight, responsible conduct of research, research administration, and other topics pertinent to the interests of member organizations and individual learners. CITI accounts can be created at the CITI login page. Please contact the CHRISTUS Health IRB Compliance Officer for instructions on how to affiliate with CHRISTUS Health and the applicable courses at [CHRISTUS.IRB@christushealth.org](mailto:CHRISTUS.IRB@christushealth.org) or 469-282-2686 and request to speak to the CHRISTUS Health IRB Compliance Officer.

**Congenital anomaly or birth defect:** Exposure or suspected exposure to a medical product prior to conception or during pregnancy may have resulted in an adverse outcome in the child.

**Continuing noncompliance:** Noncompliance is a failure to comply with the IRB-approved study design or study related documents (see above definition of protocol deviation). Any failure to comply with the IRB-approved study design may be found as serious noncompliance by the CHRISTUS Health IRB. Continued failure to comply with the IRB-approved study design may be determined as continuing noncompliance by the CHRISTUS Health IRB. If the CHRISTUS Health IRB determines that a serious noncompliance issue has occurred or that continuing noncompliance is occurring the CHRISTUS Health IRB may suspend or terminate the approval of the research project. In the event that any of the above occur the CHRISTUS Health IRB will process the noncompliance report according to the CHRISTUS Health IRB guidance IRB Reporting to Institutional Officials and External Agencies.

**Continuing review** Except for studies determined to be exempt from IRB oversight, all human subjects studies are subject to continuing review. The IRB is required to review and approve all non-exempt research projects at intervals appropriate to the degree of risk, but not less than once a year [45 CFR

46.109(e) (DHHS) and 21 CFR 56.109(f) (FDA)]. This is called "continuing review." The continuing review for these studies is required to occur as long as the research remains active for long-term follow-up of the research subject, even when the research is permanently closed to the enrollment of new subjects and all subjects have completed all research-related interventions, as well as when the remaining research activities are limited to collection of private identifiable information. The IRB, IRB Chair, or Chair Designee reviews the continuing review application submission form as well as the research project and applicable attachments in its entirety.

**Contract research organization (CRO)** a company that provides support to the pharmaceutical, biotechnology, and medical device industries in the form of research services outsourced on a contract basis.

**Contract research organization (CRO) approved deviation:** Any deviation from the IRB-approved study design and study related documents that has been pre-approved by the study sponsor or study CRO.

**Contract research organization (CRO) expected adverse event:** Adverse events that are listed in the protocol, informed consent form, or Investigator's Brochure as expected events or known adverse events to the drug or device. These events should be reported to the CHRISTUS Health IRB as per sponsor or CRO guidelines and SOPs.

**Correspondence** are those messages sent to the study team, regional directors, IRB director, IRB coordinators, and IRB members regarding information on the project. All correspondence sent via iRIS is tracked and can be reviewed at any time.

**De-identified health information** neither identifies nor provides a reasonable basis to identify an individual. There are two ways to de-identify information; either: (1) a formal determination by a qualified statistician; or (2) the removal of specified identifiers of the individual and of the individual's relatives, household members, and employers is required, and is adequate only if the covered entity has no actual knowledge that the remaining information could be used to identify the individual.

**Disability or permanent damage:** The adverse event resulted in a substantial disruption of a person's ability to conduct normal life functions, i.e., the adverse event resulted in a significant, persistent or permanent change, impairment, damage or disruption in the patient's body function/structure, physical activities and/or quality of life.

**Determinations** are stipulations that are set by the IRB Chair, Vice-Chair, director, or IRB Board for a project that must be met prior to the final approval of the project.

**Emergency use** of an FDA-regulated investigational product is defined as the use of an investigational drug, biological product or medical device in a patient (human subject) with a life-threatening situation in which no standard acceptable treatment is available and there is not sufficient time to obtain approval from the IRB. This does not include the "off-label" use of approved medical products in the practice of medicine (i.e., used in a non-research context). All reviews of an Emergency Use of Investigational Drug/Biologic/Device must be conducted at a fully convened Meeting of the IRB.

**Health Insurance Portability and Accountability Act (HIPAA)** legislation that provides data privacy and security provisions for safeguarding medical information, protected health information, and individually identifiable health information.

**HIPAA Authorization** the patient(s) written authorization for any use or disclosure of protected health information that is not for treatment, payment or health care operations or otherwise permitted or required

by the Privacy Rule. An investigator may not withhold treatment, payment, enrollment, or benefits eligibility on an individual not granting an authorization

**HIPAA Waiver of Authorization** allows doctors to provide information on a patient's health to third parties, such as researchers, students, attorneys, other doctors or family members

**Hospitalization or prolongation of hospitalization:** Admission to the hospital or prolongation of hospitalization was a result of the adverse event. Emergency room visits that do not result in admission to the hospital should be evaluated for one of the other serious outcomes (e.g., life-threatening; required intervention to prevent permanent impairment or damage; other serious medically important event).

**Human Patient** (for the purposes of case reports/studies) a living or deceased individual about whom an investigator (whether professional or student) obtains

- (1) Data through interaction with the individual or medical and other personal records, or
- (2) Identifiable private information.

**Humanitarian Device Exemption** is an approval process provided by the United States Food and Drug Administration allowing a medical device to be marketed without requiring evidence of effectiveness. The FDA calls a device approved in this manner a "Humanitarian Use Device" (HUD).

**IND safety reports:** While the Sponsor is required to collect all IND Safety Reports for a given protocol, only a small subset of those reports should be submitted to the IRB. Only those IND Safety Reports that may, in the opinion of the Sponsor/CRO/SMO or Principal Investigator, represent an unanticipated problem involving risks to subjects or others should be reported to CHRISTUS Health IRB.

**Individually identifiable health information** is information that is a subset of health information, including demographic information

**Informed Consent** permission granted by the subject with the knowledge of the possible consequences, for treatment with full knowledge of the possible risks and benefits to participate in a research project.

**Interaction** includes communication or interpersonal contact between investigator and patient.

**Intervention** includes both physical procedures by which data are gathered (for example, venipuncture) and manipulations of the subject or the patient's environment that are performed for research purposes.

**Institutional Review Board (IRB)** means an institutional review board established in accord with and for the purposes expressed in this policy.

**IRB Approval** means the determination of the IRB that the case report/study has been reviewed and may be conducted at an institution within the constraints set forth by the IRB and by other institutional and federal requirements.

**iRIS** The electronic portal that the CHRISTUS Health IRB utilizes for submissions.

**Legally Authorized Representative (LAR)** an individual or judicial or other body authorized under applicable law to consent on behalf of a prospective subject to the subject's participation in the procedure(s) involved in the research.

**Life-threatening Event:** The patient was at substantial risk of dying at the time of the adverse event, or use or continued use of the device or other medical product might have resulted in the death of the patient.

**NCT number (clinicaltrials.gov)** A unique identification code given to each clinical study record registered on ClinicalTrials.gov. The format is "NCT" followed by an 8-digit number (for example, NCT00000419). Also called the ClinicalTrials.gov identifier.

**Noncompliance:** Noncompliance is a failure to comply with the IRB-approved study design or study related documents (see above definition of protocol deviation).

**Outcome Letter** means the official notification by the CHRISTUS Health IRB to the investigator, in accordance with the requirements of this guidance that a case report/study involving human patients has been reviewed and a determination has been made.

**Other serious or important medical events:** The event does not fit the other outcomes, but the event may jeopardize the patient and may require medical or surgical intervention (treatment) to prevent one of the other outcomes. Examples include allergic bronchospasm (a serious problem with breathing) requiring treatment in an emergency room, serious blood dyscrasias (blood disorders) or seizures/convulsions that do not result in hospitalization. The development of drug dependence or drug abuse would also be examples of important medical events.

**Parental permission of a minor to participate in a research project** informed consent signed by the parents, legal guardian, or legally authorized representative of a minor to participate in a research project.

**Principal Investigator (PI)** – A Principal Investigator is the primary individual responsible for the preparation, conduct, and administration of a research grant, cooperative agreement, training or public service project, contract, or other sponsored project in compliance with applicable laws and regulations and institutional policy governing the conduct of sponsored research.

**Private information** includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record). Private information must be individually identifiable (i.e., the identity of the subject is or may readily be ascertained by the investigator or associated with the information) in order for obtaining the information to constitute research involving human subjects unless data are obtained through intervention or interaction with the individual.

**Prospective Case Report/Study** looks forward and examines three or less patients or cases for an outcome(s) that is based on standard of care treatment only. Prospective case reports/studies generally require HIPAA authorization.

**Protected Health Information (PHI)** individually identifiable health information, held or maintained by a covered entity or its business associates acting for the covered entity, that is transmitted or maintained in any form or medium (including the individually identifiable health information of non-U.S. citizens). This includes identifiable demographic and other information relating to the past, present, or future physical or mental health or condition of an individual, or the provision or payment of health care to an individual that is created or received by a health care provider, health plan, employer, or health care clearinghouse. For purposes of the Privacy Rule, genetic information is considered to be health information. (45CFR160.103)

**Protocol deviation:** Any unapproved change, divergence, or departure from the IRB-approved study design and study related documents and may or may not affect the subject's safety, rights, or welfare and/or the completeness, accuracy, and integrity of the study data

**Quality Improvement/Quality Assurance (QI/QA)** activities have been defined as systematic, data-guided initiatives designed to enhance health care delivery in a particular setting. QI is an integral part of good clinical practice whereby results are used to inform the provision of healthcare services for patients at the local institution.

**Recruitment materials** all materials aimed at recruiting participants into a research study (including the final copy of printed advertisements, scripts, audio or video tapes, or web sites)

**Required intervention to prevent permanent impairment or damage:** Medical or surgical intervention was necessary to preclude permanent impairment of a body function, or prevent permanent damage to a body structure, either situation suspected to be due to the use of a medical product.

**Research** a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes. Case reports/studies can be considered research under certain circumstances. For example, some demonstration and service programs may include research activities.

**Retrospective Case Report/Study** looks backwards at existing data and examines the medical and/or clinical care chart and/or records that have been generated as a matter of “standard of care” of certain factors in relation to an established outcome.

**SERIOUS ADVERSE EVENT (SAE):** The FDA defines an SAE as: An AE is considered “serious” (SAE) if, in the view of either the investigator or sponsor, it results in any of the following: Death, Is considered Life-threatening, Results in Hospitalization or Prolongation of hospitalization, Results in a disability or permanent damage, Causes a congenital anomaly or birth defect, Requires or Required intervention to prevent permanent impairment or damage, Other Important medical event

**Serious noncompliance:** Noncompliance is a failure to comply with the IRB-approved study design or study related documents (see above definition of protocol deviation). Any failure to comply with the IRB-approved study design may be found as serious noncompliance by the CHRISTUS Health IRB. Continued failure to comply with the IRB-approved study design may be determined as continuing noncompliance by the CHRISTUS Health IRB. If the CHRISTUS Health IRB determines that a serious noncompliance issue has occurred or that continuing noncompliance is occurring the CHRISTUS Health IRB may suspend or terminate the approval of the research project. In the event that any of the above occur the CHRISTUS Health IRB will process the noncompliance report according to the CHRISTUS Health IRB guidance IRB Reporting to Institutional Officials and External Agencies.

**Sponsor approved deviation:** Any deviation from the IRB-approved study design and study related documents that has been pre-approved by the study sponsor or study CRO.

**Sponsor expected adverse event:** Adverse events that are listed in the protocol, informed consent form, or Investigator’s Brochure as expected events or known adverse events to the drug or device. These events should be reported to the CHRISTUS Health IRB as per sponsor or CRO guidelines and SOPS.

**Stipulations** are submission correction or clarification requests sent to the study team from the IRB coordinators, director, or Board members.

**Stipulation tracking** within iRIS is a component of the iRIS system that tracks all stipulations that were sent to the study team. This tracking component records all stipulations sent, when they were sent, and when they were met.



**Sub-Investigator (Sub-I)** –Sub-I(s) are key personnel who have responsibilities similar to that of a PI on research projects. While the PI has ultimate responsibility for the conduct of a research project, the Sub-I is also obligated to ensure the project is conducted in compliance with applicable laws and regulations and institutional policy governing the conduct of sponsored research.

**Vulnerable/Special Populations** Vulnerable subject populations such as children, prisoners, and pregnant women (covered in the subparts of the federal regulations for human subjects research (45CFR46, 21CRF50)), and special classes of subjects including students, employees, and cognitively impaired individuals who may be vulnerable in terms of their research participation. The Belmont principle of respect for persons is not upheld when subjects are unduly influenced; that is, when they are offered an “excessive, unwarranted, inappropriate, or improper reward” in an effort to secure their participation in a research study. (Just one of many possible examples is offering free health care to individuals with major medical problems and limited resources as an inducement to participate.) Such offers may lead individuals to participate in studies to which they would otherwise have strong objections based on risk tolerance and personal values or preferences. Coercion involves an “overt or implicit threat of harm or reprisal” in order to obtain compliance with a request to participate in research. Coercion occurs when someone is in a position to make potential subjects worse off if they don’t participate. This power imbalance may very well interfere with a potential subject’s capacity to choose or act voluntarily. For example, a provider might threaten to withdraw services unless a client participates in a study, or a student might enroll in a study due to fear of receiving a poor grade in a class. Coercion can also take more subtle forms, such as when workplace culture encourages staff participation in research, and those who decline may be seen as outsiders who are not committed to organizational goals. With regard to cognitive impairment, the primary issue is impaired consent capacity, which occurs along a continuum in a wide range of conditions and circumstances. Assessments of consent capacity should be tailored to the study population, risk level, and likelihood of involvement of persons with cognitive impairment.