CHAPTER 3: RESEARCH RISKS & LEVELS OF IRB REVIEW

IRB approval must be obtained prior to initiating any research activity that meets either the DHHS definition of research involving human participants or the FDA definition of clinical investigation involving human participants and prior to implementing amendments to previously approved research (except when necessary to eliminate apparent immediate hazards to participants). However, HU Faculty and Staff do not have the authority to determine whether human subjects activity needs IRB review. The IRB will publish submission deadlines for studies requiring review by the full convened board at the start of each semester. New submissions requesting expedited review or exempt status can be submitted at any time and are reviewed on an on-going basis.

All forms required for an IRB submission are available on the IRB website. The PI is responsible for submitting complete forms and required supporting documentation. The PI must sign all submissions. Students are required to sign the submission when the research is student initiated (research is related to the doctoral dissertation or master's degree). The signature of the Department Head or Dean is required for all submissions unless the research is funded by an external grant or contract. The signature of the medical monitor is required for interventional studies that are monitored by a physician. The IRB staff and reviewer reserve the right to return any submission that is incomplete or on out-dated forms.

I. Determining the Level of IRB Review

Investigators make an initial determination for which type of review is appropriate for their study (full board, expedited, or exempt) and submit the required number of copies of the protocol and supporting documentation. Upon receipt, the IRB Chair or IRB staff member screens the protocol to verify the PI's initial determination. The protocol is then placed into the appropriate queue for review. The Chair, or his/her designee, makes the final determination of the type of review required and the appropriate expedited or exempt category.

II. When Submission to the IRB is Required

A protocol application must be submitted to the IRB for any study for which research is the intent and the researcher proposes to use or involve any of the following:

- identifiable data collected for non-research purposes (e.g., academic or medical records);
- interaction (communication or interpersonal contact between investigator and participant) through interviews, surveys, and other forms of communication;
- intervention (physical procedures by which data are gathered and manipulations of the participant or the participant's environment that are performed for research purposes);
- student research projects conducted as part of Research Methods Courses;
- access to medical records and data through the medical information systems;
- pathological specimens (directly identifiable or identifiable via codes);
- diagnostic specimens (directly identifiable or identifiable via codes).

The IRB reviews projects when the research:
- is sponsored by the institution;
- is conducted by or under the direction of an employee or agent of the institution in relation to his/her institutional responsibilities;
- is conducted by or under the direction of an employee or agent of the institution using resources of the institution; or
- involves the use of the institution's non-public information (i.e. alumni, students, staff, etc.) to identify or contact human research participants or prospective participants.

The IRB Chair, IRB member, or IRB staff (acting as a designee of the Chair), may determine if a proposed project using human materials/data constitutes human participant research. Investigators are encouraged to submit their proposed project to the IRB using the IRB-5 Request for Exemption from Continuing Review protocol form. The form will be reviewed and a final determination will be made as to whether a study meets the definitions of human participant research set forth in 45 CFR 46.102(d)(f). If the determination is that the project does not constitute human participant research, a letter of determination will be sent to the investigator and the IRB will have no further involvement. If the determination is that the research does involve human participants, the IRB-5 will be reviewed and approved in accordance with the exemption process described above. An IRB-1 application may be required if the research project does not qualify for exempt status. The IRB staff will send a written determination regarding the proposed project to the PI.

III. Exempt Research
Federal regulations allow six specific categories of human participant research to be exempt from continuing IRB review. Although these six categories do involve research with human participants, the research does not expose participating participants to psychological, social or physical risks. Per 45 CFR 46.101(b), the exempt research categories are:

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:
   a. information obtained is recorded in such a manner that human participants can be identified, directly or through identifiers linked to the participants; and
   b. any disclosure of the human participants' responses outside the research could reasonably place the participants at risk of criminal or civil liability or be damaging to the participants' 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 (b)(2) of this section, if:
   a. the human participants are elected or appointed public officials or candidates for public office; or
   b. 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 these sources are publicly available or if the information is recorded by the investigator in such a manner that participants cannot be identified, directly or through identifiers linked to the participants.
5. Research and demonstration projects which are conducted by or participant to the approval of Department or Agency heads, and which are designed to study, evaluate, or otherwise examine:
   a. Public benefit or service programs;
   b. procedures for obtaining benefits or services under those programs;
   c. possible changes in or alternatives to those programs or procedures;
   d. or 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,
   a. if wholesome foods without additives are consumed or
   b. 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.

Category 4 applies to retrospective studies of specimens and/or data that have already been collected. The materials must be "on the shelf" (or in the freezer) at the time the protocol is submitted to the IRB. Research that involves the ongoing collection of the specimens and/or data does not meet the criteria for category 4. Category 5 pertains only to studies sponsored or funded by DHHS. Research participant to FDA regulations does not qualify for exemption categories 1 – 5.

Per 45 CFR 46.101(i), the exemptions at 45 CFR 46.101(b) do not apply to research involving prisoners, subpart C. Also, the exemption at 45 CFR 46.101(b)(2), for research involving survey or interview procedures or observation of public behavior, does not apply to research with children, subpart D, except for research involving observations of public behavior when the investigator(s) do not participate in the activities being observed.
In addition, although not required by regulations, IRB policies and procedures do not allow exemption of most research involving deception, audio or video taping, or HIV+ individuals.

IV. Expedited Review

Federal regulations allow nine specific categories of human participant research to be reviewed through an Expedited Review Procedure. Per 45 CFR 46.110 and 21 CFR 56.110, the research should present no more than minimal risk to human participants and involve only procedures listed in one or more of the following 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, nonpregnant adults who weigh at least 110 pounds. For these participants, 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 participants, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these participants, 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 nondisfiguring 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) uncanulled saliva collected either in an unstimulated fashion or stimulated by chewing gumbase 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 subgingival 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 participant or an invasion of the participant's privacy; (b) weighing or testing sensory acuity; (c) magnetic resonance imaging; (d) electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, 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 participants. 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 participants 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 convened IRB as follows:
   a. Where (i) the research is permanently closed to the enrollment of new participants; (ii) all participants have completed all research-related interventions; and (iii) the research remains active only for long-term follow-up of participants; or
   b. Where no participants have been enrolled and no additional risks have been identified; or
   c. Where the remaining research activities are limited to data analysis.

9. 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 convened meeting that the research involves no greater than minimal risk and no additional risks have been identified.
V. Research Requiring Full IRB Review
Proposed research that does not qualify for either exempt status or expedited review will be sent to the convened board for full review.