# CATEGORIES OF RESEARCH

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| **SOP #:** | **504** | **VERSION #:** | **1** | **EFFECTIVE DATE:** | **6/1/14** | **SUPERSEDES DOCUMENT:** | **5/1/09** |
| **THIS POLICY PERTAINS TO:** | | | **ALL RESEARCH SUBMITTED TO THE IRB** | | | | |
| **RESPONSIBILITY FOR EXECUTING POLICY:** | | | **ASSOCIATE VICE PRESIDENT FOR RESEARCH AND ECONOMIC DEVELOPMENT, IRB CHAIRPERSON, IRB VICE CHAIRPERSON, IRB MEMBERS** | | | | |
| **LAST REVIEWED ON:** | | **/ /** | | **RESULTS:** | **REVISED** | | |
| **APPROVAL AUTHORITY:** | | | **Associate Vice President for Research and Economic Development** | | | | |
| **APPROVED BY:** | | | | | | **DATE:** | **3/1/14** |

## 1. POLICY

The categories of research defined in these policies involve either methodologies that might require additional considerations or for which there are federally mandated determinations that IRB's are required to make and document. These categories of research include, but are not limited to:

1. Clinical research involving devices
2. Genetic research
3. Prospective research in emergency settings
4. Emergency use of an investigational article
5. Medical records and chart review
6. Residual body fluids, tissues, and recognizable body parts
7. Oral History
8. Internet Research
9. Surveys, Questionnaires, and Interviews
10. Studies Involving Existing Data
11. Participant Observation Studies
12. Social Policy Experimentation
13. Epidemiological Research
14. Biomedical Research
15. Investigational Drug Studies
16. Multi-Site Drug Studies
17. Vaccine Trials
18. Radioactive Materials and X-Rays
19. Biohazardous Materials
20. Tissue Banking
21. Commercially Available Human Biological Specimens
22. Human Tissue Specimens from Deceased Individuals
23. Transplants
24. HIV/AIDS Related Research
25. Alcohol and Drug Related Research
26. International Studies

## 2. SPECIFIC POLICY

### 2.1 Clinical Research Involving Devices

2.1.1 Definitions

Investigational Devices: Investigational devices are medical devices that are the object of clinical research to determine their safety or effectiveness. Studies undertaken to develop safety and effectiveness data for medical devices involving human subjects must be conducted according to the requirement of the Investigational Device Exemption (IDE) regulations (21 CFR 812).

2.1.2 General Process

In addition to the previous policy guidelines, the IRB (or IRB Chairperson if the review is expedited) will determine whether, in the context of the study or by the nature of the investigational medical device (see Significant Risk and Nonsignificant Risk Medical Device list), the study presents a significant risk (SR) or a non-significant risk (NSR) of harm to study subjects. This assessment will be based on the information provided by the Investigator and/or the Sponsor. The IRB device risk determination must be documented in the IRB meeting minutes.

If an Investigator submits an NSR device research protocol that is determined by the IRB to be a significant risk device study, the Investigator and FDA will be notified in writing. No further action will be taken by the IRB on the research until the Sponsor or Investigator has met the requirements for an SR study described in 21 CFR 812 (Investigational Device Exemption regulations).

**2.2 Genetic Research**

Genetic research may require special considerations.

2.2.1 Subjects of Genetic Research: At first consideration, much genetic research may appear to meet the criteria for expedited review. These include:

- Positional Pedigree studies, which look for a pattern of inheritance of a gene;
- Positional cloning studies, which are conducted to identify particular genes;
- Diagnostic studies, which gather samples to develop techniques to determine the presence of specific DNA mutations.

However, these studies may create a vulnerable population and that subjects' autonomy may be compromised. Therefore, the Full IRB must review these studies to answer the following questions:

- Will the samples be made anonymous to maintain confidentiality? If not, to what extent will the results remain confidential; and who will have access to them?
- Will the samples be used for any additional studies not made explicit at the time of donation, or will the samples be destroyed after specified, one-time use?
- Will the donor be informed of any and all results obtained from his or her DNA?
- Will the sample be sold in the future?
- Will the donor be paid for their sample now or in the future?
- Will the donor be informed of the results of the entire study?
- Will family members be implicated in the studies? If so, they are subjects.

Gene therapy research (administration of recombinant vectors), which is carried out to develop treatments for genetic diseases at the DNA level, presents obvious and not so obvious questions, including – considerations of delivery methods, target population, required follow-up. Such protocols require use of external consultants to provide independent guidance to the IRB. If the

project involves gene therapy to human subjects for other than clinical purposes, the study must be reviewed and approved by the National Institutes of Health Recombinant DNA Advisory IRB prior to IRB approval. Monitoring must be adequate, and a Data and Safety Monitoring Board (DSMB) will be required. Because there is still little regulatory guidance and relatively few ethical precedents, genetic research will require close scrutiny, and the input of experts in this area.

**2.3 Prospective Research in Emergency Settings (Prospective Review)**

The University of North Dakota currently does not do prospective research in emergency settings. When and if the university does do research in emergency settings, a procedure will be developed.

**2.4 Emergency Use of Test (Investigational) Articles (Retrospective Review)**

The University of North Dakota currently does not do research involving emergency use with a test article. When and if the university does do research involving emergency use of a test article, a procedure will be developed.

**2.5 Medical Records and Chart Review**

Investigators conducting studies involving the use of existing public or privately held records may need to abide by the requirements of the Health Insurance Portability and Accountability Act (HIPAA). Such research projects may qualify for exempt status or expedited review. However, if the nature of the research could reasonably put subjects' confidentiality at risk, the study will be reviewed by the Full IRB. Studies that involve only chart and record review can sometimes pose significant risk to patients. The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule establishes conditions under which protected health information may be used or disclosed by covered entities (hospitals, clinics, schools, etc.) for research purposes.

The most common breach of confidentiality is exposure of possible embarrassing information without the knowledge or consent of the patient. Such studies may also lead to recruitment of patients into future non-therapeutic studies in a manner which may provoke the patient to ask how his/her record was revealed to someone not part of his/her therapeutic team. The present policy is to require IRB review of studies involving chart review or data collection and analysis.

If identifiers were to be recorded, the research would require IRB review to ensure that, among other things, procedures for protecting privacy and confidentiality are adequate. Furthermore, the Investigator studying cancer risk factors may propose to go on to contact the subjects (if still living) or family members (if the subject is deceased) to gather additional information, which may or may not be subject to the federal regulations.

**2.6 Residual Body Fluids, Tissues and Recognizable Body Parts**

Body Fluids & Tissues: Research on existing specimens ("on the shelf" or frozen) without identifying information (e.g., no names, initials, hospital number, etc.) may be submitted to the IRB for exempt or expedited review, and must include a short description of the research and where the tissue is coming from.

## 2.7 Oral History

Historians sometimes conduct interviews, or "oral histories" with sources (knowledgeable people) to supplement written documents and artifacts in attempting to preserve information about past events. Like journalists, historians interview sources to obtain "eyewitness" accounts of events.

Oral histories do not meet the definition of research and do not require IRB review and approval under the following conditions: (1) they focus exclusively on past events; and (2) they are conducted to understand or explain a particular past or unique event in history. The IRB recognizes that social scientists other than historians may conduct research that meets these criteria and that historians may conduct research that does not meet these criteria and requires IRB Review.

There are additional considerations when reviewing oral history research proposals. Principal Investigators should be familiar with the Oral History Association's standards of ethics and should review John Neuenschwander's, *Oral History and the Law*. The following statements must be addressed in the proposal, if applicable:

1. The interviewee is given an opportunity to review and to approve of the conditions of use or publication of the data.
2. The interviewee is given an opportunity to provide informed and effective consent for the interview. The consent form must state that the interviewee can refuse to answer any questions, can limit the time of the interview, and has the right to suggest topics that are not to be discussed during the interview.
3. The interviewee is given an opportunity to provide informed and effective consent to the disposition of the records and/or access to the recordings. The consent form should indicate the rights of the subjects with regard to editing, access, copyright, prior use royalties, and the expected dissemination of all forms of the record. It should be noted that if the recordings are archived outside of the researcher's control, the researcher may not be able to anticipate all uses of the record.
4. There must be adequate means provided for the protection of the privacy of any third parties (such as disguising the identities) of those who may be named in the interview. The researcher and the repository will follow conditions that the interviewee stipulates regarding the dissemination of the interview, such as not publishing until after death or after a specific period of time. The repository must accept the interviewee's conditions, provided they are reasonable and legally acceptable. The accepted conditions must be noted in the cooperating repository's letter.
5. State any arrangements made to deposit interviews. The repository must be capable of preserving the interviews and making them available for general research. A letter of acceptance from the repository must be submitted with the research proposal.

## 2.8 Internet Research

In addition to the information requested in the Human Subjects Review Form, researchers must address the following in the research proposal, if applicable:

1. State how subjects will be recruited.
2. State that the survey is part of a research project. Researchers need to explicitly state this information in both the survey's introductory page/screen and in the informed consent information. Researchers may want to add a hyperlink to their institution on the introductory page/screen to demonstrate their affiliation.

3. State contact information. This can be accomplished by placing email links to the researcher(s) throughout the screens containing the introduction, consent, and/or debriefing information. As email links may cause problems with confidentiality, a telephone number for the researcher should also be provided.
4. Discuss to what degree the research conducted is intrusive;
5. How can anonymity of participants be protected (quotes may be easily identified with search engines)
6. Provide feedback (debriefing) to participants at the end of the survey.

For research on an Internet community, the following also applies:

1. Discuss the level of perceived privacy of the community; is it a closed group requiring registration? What is the membership size? What are the group norms?
2. Discuss how vulnerable the community is (victims of sexual abuse, AIDS patients, etc)
3. As a result of the above considerations, discuss whether the intrusion of the researcher or publication of results has the potential to harm individuals or the community as a whole.
4. Discuss whether informed consent is required or can be waived.
5. In some cases, participants may not seek anonymity, but publicity, so that use of postings without attribution may not be appropriate.

**2.14 Biomedical Research** (21 CFR 50, 21 CFR 56, 21 CFR 630, 21 CFR 312, 21 CFR 314, 21 CFR 52)

In addition to IRB approval, the Principal Investigator may be required to obtain approval from the UND Institutional Biosafety Committee. The UND Safety Officer should be contacted for more information. Additional time and copies of the proposal will be required to review the proposal, as it will require review by the medical subcommittee.

**2.15 Vaccine Trials** (21 CFR 50; 21 CFR 56; 21 CFR 312; 21 CFR 600-800 and 21 CFR 630)

The UND IRB must ensure that animal trials and laboratory tests have demonstrated, as much as possible, that the vaccine is safe. The IRB will review the consent form to ensure that all known risks have been stated. The IRB must ensure that the protocol includes appropriate screening of possible subjects. Proper monitoring of subjects must be detailed in the protocol and subjects should receive written instructions about whom to contact in the event of serious adverse reactions. Additional time and copies of the proposal will be required to review the proposal, as it will require review by the medical subcommittee.

**2.16 Radioactive Materials and X-Rays** (21 CFR 50, 21 CFR 56, 21 CFR 361.1, 21 CFR 312, 10 CFR 19, 10 CFR 20 and 10 CFR 35)

In addition to IRB approval, the Principal Investigator will be required to obtain approval from the UND Radiation Safety and Hazardous Wastes Committee. The UND Safety Officer should be contacted for more information. Projects will be reviewed by the UND IRB according to federal guidelines. The federal guidelines are the minimum standards, and the IRB has the authority to raise the standards as it feels necessary for individual cases.

**2.17 Biohazardous Materials** (21 CFR 600-800, 21 CFR 50 and 21 CFR 56)

Projects will be reviewed by the UND IRB according to federal guidelines. The federal guidelines are the minimum standards, and the IRB has the authority to raise the standards as it feels necessary for individual cases. In addition to IRB approval, the Principal Investigator may be required to obtain approval from the UND IBC. The UND Safety Officer should be contacted for more information.

**2.18 Prospective Tissue Banking** (45 CFR 46.102, 46.103, and 46.116)

A proposal must be submitted to the UND IRB describing the policies and procedures for the collection and handling of stored specimens. The IRB must be able to evaluate the procedures to ensure confidentiality of the subjects and that the subjects will be protected.

The proposal must address the following items:

1. How specimens will be obtained, processed and stored;
2. How specimens will be labeled;
3. How clinical data will be associated with the specimen, and how that clinical data will be collected;
4. What identifying information will be collected;
5. How identifiers will be linked to specimens;
6. What steps will be followed to maximize the confidentiality of linked identifiers;
7. How specimens will be distributed;
8. How the secondary distribution of specimens will be controlled;
9. How subjects' rights will be protected with any future use of the specimens not previously approved by an IRB;
10. If results will be shared with the subjects, how will they be shared;
11. If children are used, how will future adult consent be secured;
12. A separate consent form must be used to obtain permission for specimen banking; and
13. A Certificate of Confidentiality should be obtained.

**2.19 Commercially Available Human Biological Specimens** (45 CFR 46.102, 46.103, and 46.116)

The use of commercially available human biological products (cell lines, serum, albumin) that are non-identifiable and are bought from a bank do not need IRB review.

**2.20 Transplant Research** (45 CFR 46.111(a)(3))

Researchers must address how they obtained informed consent without coercion or undue influence.

Additional time and copies of the proposal will be required for review of the proposal, as it will require review by the medical subcommittee. Projects will be reviewed by the UND IRB according to federal guidelines. The federal guidelines are the minimum standards, and the IRB has the authority to raise the standards as it feels necessary for individual cases.

**2.21 AIDS/HIV Related Research** (21 CFR 50, 21 CFR 56, 21 CFR 56, 21 CFR 312, 45 CFR 46 Subpart B-D)

State law may be relevant to HIV research depending on the nature of the research being conducted. See North Dakota Century Code, Ch. 23-07.5 (1991 and Suppl. 1993). Projects will be reviewed by the UND IRB according to federal guidelines and state laws. The federal guidelines are the minimum standards, and the IRB has the authority to raise the standards as it feels necessary for individual cases.

**2.22 Alcohol and Drug Related Research** (45 CFR 46.116, 45 CFR 46 Subpart D, 21 CFR 50.20 and 21CFR 50.25)

Alcohol and drug research focuses on the use, abuse, and dependence on abuse-liable substances. The research may or may not involve the administration of an abusable substance. It may seek to investigate physiological responses to alcohol or drugs, or may be aimed at the treatment of alcohol or drug abuse.

This research may be reviewed as expedited or by the Full IRB depending on the level of risk assumed by the subjects. The researcher may want to request a Certificate of Confidentiality from the appropriate federal official. These certificates protect data against compelled disclosure, but not from voluntary disclosure (e.g., reporting of communicable diseases or suspected child abuse). The IRB will need to determine that the consent form clearly spells out what information can and cannot be released.

**2.23 International Studies** (45 CFR 46.101, 46.101(h), and FDA, Parts 50 and 56)

Studies being conducted outside the U.S. will be reviewed according to federal regulations. Although, federal regulations governing research on humans cannot be imposed on other cultures in other nations. It is the expectation of the IRB and the University of North Dakota that ethical standards will be upheld and subjects provided with the same level of protection as subjects in the United States. The federal guidelines are the minimum standards, and the IRB has the authority to raise the standards as it feels necessary for individual cases.

For additional information and requirements for investigators, please refer to Standard Operating Procedures 414: International Research.

## 3. RESPONSIBILITY

The IRB Coordinator is responsible for maintaining up-to-date review tools for review of research pertaining to these categories based on new and evolving applicable regulations and guidelines.

The IRB Chairperson or IRB Coordinator and /or IRB Secretary is responsible for ensuring the IRB members are well versed in new and evolving regulations and guidelines pertaining to these categories, for selecting primary reviewers with appropriate expertise to conduct the reviews of such research and for securing appropriate consulting expertise as needed for selected reviews.

The IRB Chairperson and Reviewer are responsible for conducting appropriate review of research planned for these categories in consultation with any appropriate experts and resources.

## 4. APPLICABLE REGULATIONS AND GUIDELINES

10 CFR 19-20
10 CFR 35

21 CFR 50; 50.20; 50.24; 50.25
21 CFR 52
21 CFR 56; 56.104
21 CFR 102
21 CFR 132
21 CFR 312
21 CFR 314; 314.11
21 CFR 361.1
21 CFR 600-800; 603; 630; 812
IRB Guidebook
Eysenbach, Gunther, and Till, James E (2001). Ethical Issues in Qualitative Research on Internet Communities. *BMJ, Vol. 323*, 1103-5

## 5. ATTACHMENTS

Significant Risk and Nonsignificant Risk Medical Device list
SC 504-A Risk Determination for Devices

## 6. PROCEDURES EMPLOYED TO IMPLEMENT THIS POLICY

### 6.1 Medical Device

| Who | Task |
|---|---|
| *IRB Secretary* | Include the Checklist in the Primary Reviewer's packet when a medical device is the study article. |
| *IRB Members (Reviewers)* | Perform the device risk determination to verify that the Sponsor's determination is accepted. |
| *IRB Secretary* | Notify the appropriate entities if the IRB rejects the Sponsor's NSR device determination. |
| *IRB Members* | Conduct review of NSR device or await Sponsor's submission of an IDE for SR devices before proceeding with device study review. |

### 6.2 Genetic Research

| Who | Task |
|---|---|
| *Associate Vice President for Research and Economic Development, IRB Chairperson* | Identify and invite appropriate consultant(s) who may assist the IRB in its deliberations. |
| *IRB Chairperson, IRB Vice Chairperson or IRB Coordinator* | Determine whether the research is exempt from IRB review, eligible for expedited review, or subject to Full IRB review. |

### 6.3 Residual Body Fluids, Tissues and Recognizable Body Parts

| Who | Task |
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| *IRB Chairperson, IRB Vice Chairperson* | Determine whether the research is exempt from IRB review, eligible for expedited review, or subject to Full IRB review. |
| *IRB Secretary* | If subject to Full Board or expedited review, include the Checklist in the Primary Reviewer's packet. |