

<b>Oklahoma State University Institutional Review Board Standard Operating Procedures</b>		
<b>Continuation Review</b>	SOP #	RR 406
	Effective Date	1/1/2012
	Revision Date	12/17/2015
	Revision #	1
	Approval: IRB	02/10/2016

## **1. POLICY**

Any research activity involving the use of human subjects that has received initial review and approval by the IRB is subject to continuing review and approval. The time interval for conducting continuing review shall be determined by the IRB but will occur not less than once per year. "Not less than once per year" means that the research activity must be reviewed on or before the one-year anniversary of the IRB approval date, even though the research activity may not have begun until sometime after the IRB gave its approval.

### **Specific Procedures**

#### **1.1 Notification of Approval Expiration**

1.1.1 The IRB Coordinator will identify protocols that will require continuing review approximately 60 days prior to the first day of the month in which a protocol's current approval will expire. An email message will be sent to the principal investigators (PIs) of these protocols requesting either 1) a written response to close the protocol or 2) submission of a continuation/renewal form requesting extension of approval.

A second notice will be sent to all PIs who have not responded 30 days prior to the first day of the month in which a protocol's current approval will expire.

If a Continuation/Renewal form is not submitted to the IRB and written notice that the protocol should be closed is not received before the approval expiration date, the protocol will be closed. A final email message will be sent to investigators notifying them that the protocol has been closed and no human subjects research may continue without submission of a new application to the IRB for review and approval.

1.1.2 There is no grace period extending the conduct of the research beyond the expiration date of IRB approval. Extensions beyond the expiration date will not be granted. If the continuation/renewal materials are not received in sufficient time to allow for appropriate review prior to approval expiration, the investigator must stop all research procedures, recruitment, enrollment, interventions, data collection, and data analysis until the continuation materials have been reviewed and approved.

1.1.3 Investigators who believe that currently enrolled subjects will be at risk if the research is suspended or discontinued must immediately contact the IRB office with a detailed explanation of the risks posed to subjects if the research is temporarily halted. This information will be reviewed by the IRB Chair, or at the Chair's discretion, brought to the convened IRB to determine if the interventions or interactions should continue. New subject enrollment will not be allowed in the interim.

#### **1.2 Submission of Continuation/Renewal Request**

1.2.1 Investigators must submit the request for continuation of approval, and any proposed changes to the IRB on the Continuation/Renewal Request form. The investigator is responsible

for completing the Continuation/Renewal Request form according to the instructions on the form and providing all requested information and documents.

1.2.2 The investigator submits one (1) completed Continuation/Renewal Request form and any required and/or modified documents to the Office of University Research Compliance (URC).

1.2.3 Upon receipt of the form and ancillary materials, the request is entered into the IRB electronic tracking system by the IRB Coordinator.

### **1.3 Criteria for Continuation/Renewal**

1.3.1 Continuing review must be substantive and meaningful. When considering whether or not to renew a research study, the IRB revisits the same criteria used to grant initial approval. Therefore, the IRB (or the individual reviewer(s) for continuation requests reviewed under an expedited procedure) must determine that:

1. The risks to subjects continue to be minimal and reasonable in relation to the anticipated benefits of the research;
2. The selection of subjects continues to be equitable and reasonable in relation to the anticipated benefits of the research;
3. Informed consent continues to be appropriately obtained and documented (as applicable);
4. Additionally, that there are:
  - provisions for safety monitoring of the data; and
  - protections to ensure the privacy of subjects and confidentiality of data, as well as appropriate safeguards in place for vulnerable populations.

Because in the rare instance it may be only after research has begun that the real risks materialize and can be evaluated, with the preliminary results being used to compute the actual risk/benefit ratio; the IRB can then determine whether or not the study can be renewed at the same risk/benefit ratio, or if new information has changed that determination.

1.3.2 In order to determine the status of the on-going research study, the following will be reviewed:

Continuation/Renewal Request form: This form requests a protocol summary and status report that includes the number of subjects accrued; if there have been any unanticipated problems or adverse events; a summary of subject withdrawal if applicable; a summary of any complaints; and a summary of any modifications made to the research.

Consent document: The IRB or designated members will review the currently approved consent document, including assent documents and parental/legal guardian permission forms if applicable, to ensure that the information remains accurate and complete. Any significant new findings that may relate to a subject's willingness to continue participating in the research will be provided to the subject in an updated consent document, including any assent document and/or parental/legal guardian permission form, if applicable.

Current approved protocol including any amendments to the protocol since its initial review: Modifications and addenda to a research protocol will be submitted as generated during the course of the study in accordance with SOP RR405. They may also be submitted at the time of continuing review.

1.3.3 Protecting the rights and welfare of subjects sometimes requires the IRB to independently verify, utilizing sources other than the investigator(s), that no material changes have occurred since the previous IRB review. Additional sources may include: incident reports, information

from other oversight committees (IACUC, IBC, etc.), as well as information from staff, research subjects, sponsors, or others. The IRB considers the following factors when determining which studies require independent verification:

- probability and magnitude of anticipated risks posed to subjects;
- likely medical/psychological condition of potential subjects;
- prior experience of the investigator and other members of the research team; and
- other factors the IRB deems relevant.

1.3.4 Continuing review is required as long as individually identifiable data continue to be collected on subjects or individually identifiable data are maintained for data analysis. In addition, continuing review is required when research activities are limited to the analysis of data that include

identifiable private information as defined in 45 CFR 46.102(f)(2). This remains the case even after a protocol has been closed at all study sites and protocol-related treatment has been completed

for all subjects. These renewal requests may qualify for expedited review.

## 1.4 Continuation Review Process

### 1.4.1 Determination of Review Level

The IRB Manager will review the Continuation/Renewal Request form and associated documents to determine if the request qualifies for the expedited review procedure (as allowed by the federal regulations, 45 CFR 46.110) or if it must be reviewed by the convened IRB. Research originally reviewed at the exempt or expedited level will generally qualify for expedited review unless previous or proposed modifications change the risk level or include activities that do not meet the criteria for expedited review. The expedited review procedure may be used for the continuing review of research previously approved by the full Board, at a convened meeting as follows:

- where (i) the research is permanently closed to the enrollment of new subjects; (ii) all subjects have completed all research–related interventions; and (iii) the research remains active only for long-term follow-up of subjects; **or**
- where no subjects have been enrolled and no additional risks have been identified; **or**
- where the remaining research activities are limited to data analysis.

The expedited review procedure may also be used for continuing review of research not conducted under an investigational new drug application or investigational device exemption when the research does not meet the expedited review criteria or the exceptions listed above but the IRB has determined in a convened meeting that the research involves no greater than minimal risk and no additional risks have been identified.

### 1.4.2 Expedited Review of Continuation/Renewal Requests

Continuation/Renewal requests that qualify for expedited review are reviewed using the following review procedure (as allowed by the federal regulations, 45 CFR 46.110). The IRB Chair designates the IRB Manager, who is a primary member of the IRB, to review and approve continuation requests qualifying for expedited review. This expedited review process allows many continuation requests to be reviewed within the IRB office. In the absence of the IRB Manager, the IRB Chair may designate another experienced IRB member to conduct the review. If additional expertise is needed to review the continuation/renewal request, additional reviewers will be assigned in accordance with applicable pre-review procedures in SOP RR

403. If the reviewer feels that there has been a change to the risks or benefits, he or she may refer the study to the full IRB for review. The expedited reviewer exercises all the authority of the IRB except the reviewer cannot disapprove the research.

#### 1.4.3 Full Board Review of Continuation/Renewal Requests

When a continuation/renewal request is required to undergo full board review, it will be placed on the agenda of the next scheduled Board meeting and the investigator notified of the date and time of the meeting. The review procedure for a continuation/renewal request requiring review by the convened IRB will be conducted in agreement with pertinent sections of SOP RR404.

A primary reviewer is assigned by the IRB Manager to lead discussion of the continuation/renewal request. If the protocol was initially reviewed at the full board level, the primary reviewer will be the same as that for the initial full board review if possible.

### 1.5 Possible Outcomes of Continuing Review

For continuation/renewal requests reviewed via the expedited procedure, the review outcomes and notifications are the same as outlined in SOP RR403. For full board review, the review outcomes and notifications are the same as outlined in SOP RR 404.

As an outcome of continuing review, the IRB may require that the research or protocol documents be modified. In addition, the IRB can halt the research. The IRB may need to enact special precautions or relax special requirements it had previously enacted

### 1.6 Determination of Continuing Review Date

#### 1.6.1 Determination of the Initial Continuing Review Date

The start of the initial approval period for minimal risk research reviewed *via* the expedited review procedure is the date an approval letter is issued, and will be no longer than one year from that date. The approval period will be appropriate to the degree of risk posed to subjects.

For research that is initially reviewed by the full board at a convened meeting and that is approved without requiring changes to the protocol or consent documents, or submission of clarifications or additional materials, the effective date of the approval period is the date of that IRB meeting and the approval period will be no longer than one year from that date.

For research that is initially reviewed by the full board at a convened meeting and that is approved with conditions by the board, the effective date of the initial approval is the date on which the IRB chairperson (or any other individual(s) designated by the IRB) has reviewed and accepted as satisfactory all changes requested. The expiration date of the initial approval period, which is the date by which the first continuing review must occur, will be no longer than one year after that effective date of initial IRB approval.

#### 1.6.2 Determination of Date for Subsequent Continuing Reviews

If the IRB performs continuing review and re-approves (with or without conditions) a protocol within 30 days before the IRB approval period expires, the IRB may retain the anniversary of the expiration date of the initial IRB approval as the expiration date of each subsequent approval period.

## 2. SCOPE

These policies and procedures apply to all requests for continuation/renewal of approved protocols submitted to the IRB.

### 3. RESPONSIBILITY

The Investigator is responsible for the timely submission of a complete, signed Continuation/Renewal Request form and any supporting documents and for responding to any revisions requested by the reviewer(s) in a timely manner.

The IRB Coordinator is responsible for receiving the continuation/renewal request, tracking the request and documenting revisions in the IRB electronic tracking system. In addition, the IRB Coordinator is responsible for sending any revisions requested by the IRB to the investigators, reviewing revision responses, and generating continuation/renewal approval/disapproval letters.

The IRB Manager or the IRB Chair is responsible for reviewing continuation/renewal requests to determine the level of review required.

The IRB Manager and/or other IRB members designated by the IRB Chair is/are responsible for expedited review of continuation/renewal requests.

IRB members are responsible for reviewing continuation/renewal requests at convened IRB meetings or when asked.

### 4. APPLICABLE REGULATIONS AND GUIDELINES

45 CFR 46.103, 46.109, 46.115

21 CFR 56.108, 56.109, 56.113

21 CFR 812.64

### 5. REFERENCES TO OTHER APPLICABLE SOPS

RR 402

RR 403

RR 404

### 6. ATTACHMENTS

### 7. IMPLEMENTATION OF PROCEDURES

Who	Task	Tool
IRB Coordinator	Receive submissions, review for sufficient information, complete IRB electronic tracking system entry.	
IRB Manager	Review request to determine if proposed changes are minor or substantive.	
IRB Manager	Determine if additional expertise is needed for review of minor changes. Assign reviewers if needed.	
IRB Manager	Review and approve minor changes as appropriate.	
IRB Manager	Assign primary reviewer for review of substantive changes.	
IRB Members	Review substantive changes at convened meeting.	

IRB Coordinator	Generate correspondence notifying investigator of continuation request approval status (approved, pending revision, I approved with conditions, or disapproved) and document in the IRB electronic tracking system. If protocol was placed in pending or approved with conditions status, upon approval of revisions, or receipt of requested documentation and/or information, update approval status in IRB electronic tracking system and generate correspondence notifying investigator.	