

Revised 11/06/24

Institutional Review Board (RVU IRB) for Human Subjects Research – Bylaws and Standard Operating Procedures

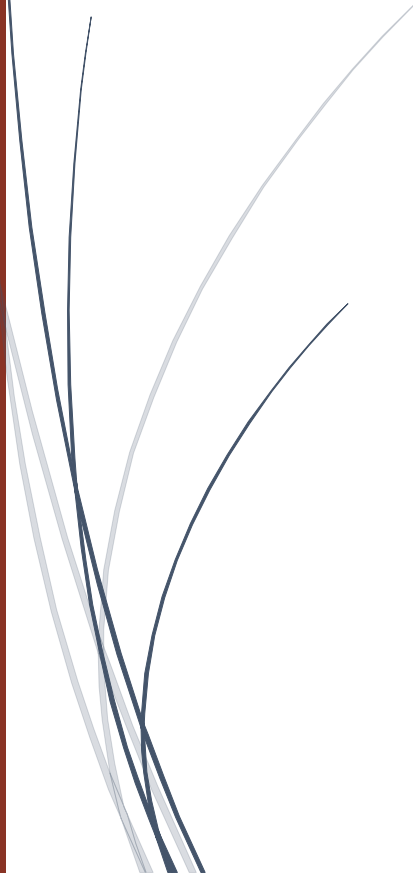


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BYLAWS AND PROCEDURES FOR THE OPERATION OF THE ROCKY VISTA UNIVERSITY

INSTITUTIONAL REVIEW BOARD FOR PROTECTION OF HUMAN SUBJECTS

The Institutional Review Board (IRB)

Mission: The mission of the RVU Institutional Review Board (IRB) is to assure adequate protections of the rights and welfare of human subjects research. To achieve this, the RVU IRB occasionally advises and consults with investigators in designing research projects in a manner to minimize potential harm to human subjects, reviews all planned research involving human subjects prior to initiation of the research, approves research that meets established criteria for protection of human subjects, and monitors approved research to ascertain that human subjects are indeed protected.

Function: The RVU Institutional Review Board (IRB) reviews all research protocols, submitted by students, faculty and/or staff involving human subjects. The IRB has the authority to approve, require modification, or to disapprove any research project, in accordance with standards set by the U.S. Department of Health and Human Services (HHS), Office of Human Research Protection (OHRP).

Ethical Principles Governing Research

The RVU IRB supports the advancement of research by creating a collaborative relationship with the research community to ensure that research with human participants is conducted in accordance with the ethical principles of *Respect for Persons*, *Beneficence*, and *Justice*, as put forth in the Belmont Report. The principle of respect for persons is applied through the informed consent process. The principle of beneficence is applied through the risk/benefit analysis which includes a review of the design of the study and the procedures in place to minimize risks. The principle of justice is applied through recruitment strategies and selection of research participants.

These ethical principles are the basis of the regulations which govern the protection of human participants in research, and apply regardless of the regulatory category (i.e., exempt, expedited, or full board) under which a study is approved. Furthermore, the IRB assures that equal protections will apply to all research involving human participants, regardless of funding source.

IRB Bylaws/ Standard Operating Procedures

Approved on June 25, 2019 by the Rocky Vista University Institutional Review Board (IRB). Revised on 11/06/24 by approval of the full Board.

Note: "45CFR46" refers to wording of Title 45 Code of Federal Regulations Part 46 Protection of Human Subjects (Revised Common Rule effective January 21, 2019)

INSTITUTIONAL REVIEW BOARD MEMBERSHIP

Composition of the IRB

The Institutional Review Board shall consist of at least six members and preferably eight or more members representing all three campuses:

- Including "at least one member whose primary concerns are in scientific areas and at least one member whose primary concerns are in nonscientific areas."(45CFR 46.107(b))

(Scientist/Nonscientist - Members whose training, background, and occupation would incline them to view scientific activities from the standpoint of someone within a behavioral or biomedical research discipline should be considered a scientist, while members whose training, background, and occupation would incline them to view research activities from a standpoint outside of any biomedical or behavioral scientific discipline should be considered a nonscientist. In addition, the IRB must have members with sufficient knowledge of the specific scientific discipline(s) relevant to the research that it reviews.)

- Including at "least one member who is not otherwise affiliated with the institution and who is not part of the immediate family of a person who is affiliated with the institution." (45 CFR 46.107 (c))
- Including, whenever possible, a diversity of members in consideration of gender, race and cultural background. (45 CFR 46.107(a))
- Including, whenever possible, members who are knowledgeable about and experienced in working with vulnerable populations, such as children, pregnant persons, prisoners, individuals with impaired decision-making capacity, or economically or educationally disadvantaged persons. (45CFR46.107 (a))
- Including members representing graduate programs likely to generate research with human subjects.

Determination of IRB members

The Institutional Review Board, as a Human Subjects Research Review Board, reports to the President. New members may be recruited, voted on, and approved by the IRB, but shall be appointed by the President.

Length of Term and Frequency of Meetings

The term of appointment shall be three years, on a staggered basis, with a new member selected each year. A member may serve a maximum of three consecutive terms. Terms begin with the academic year. The board will meet at least quarterly with more frequent meetings when required for full research reviews.

Training

The chair or his/her designee should provide an initial training session to new members prior to the first meeting of the academic year, and additional training for all members as required by current federal regulations. The CITI Program online vendor shall be used to train members on IRB roles and the Revised Common Rule.

Chairperson and Vice Chairperson

The chairperson of the IRB shall be elected by the board for a two-year term of service. The chair shall not normally be drawn from members in their first year of service. The vice chairperson shall be elected by the board for a two-year term of service with the intent that he/she will be elected as the chairperson after two years have been served by the existing chairperson.

IRB Compliance Administrator

The compliance administrator of the IRB shall keep minutes of the full-board meetings. He/she will handle the online application system and IRB information for requests from researchers and keep all IRB-approved research in organized files. He or she will also assist in tracking the status of all IRB proposals, previewing applications prior to submitting to reviewers, and ensuring the Revised Common Rule of the OHRP is followed.

RESPONSIBILITIES OF THE IRB

Quorum

A quorum consists of a majority of the board or five members, whichever is greater. These members may include the chair and the vice chair. (45CFR46.108(b) requires a majority of the members, including at least one nonscientific member).

Voting

A motion may be made by any member and seconded by a different member. Voting shall normally occur by a show of hands, in order that the number of affirmative and negative votes may be recorded.

"In order for the research to be approved, it shall receive the approval of a majority of those members present at the meeting" (45CFR46.108(b))

"If the IRB decides to disapprove a research activity, it shall include in its written notification a statement of the reasons for its decision and give the investigator an opportunity to respond in person or in writing." (45CFR46.109(d)).

IRB Member Submitting Research Proposal

When a member, or the chair of the IRB is also an investigator or advisor for a proposal being submitted, that member may provide information relating to the proposal. However, the member shall not vote, and will be excused from the room at the time of the vote. (45CFR46.107(d)). The member shall also be excused from serving as part of the process of approval when the proposal is submitted as "exempt" or "expedited".

Minutes and Agenda

Meeting agenda should include an informational record of proposals accepted as Exempt and proposals approved through the Expedited process, as well as those considered by the Full Institutional Review Board. A monthly list of approved protocols including title, level of review, category of review, the PI, and the IRB reviewer(s) will be sent out to the IRB.

A review and approval of the previous IRB meeting minutes shall be part of the agenda.

For proposals considered by the full board, meeting minutes should include a summary of the discussion (or an indication of no discussion, if warranted), and a specific accounting of the number of "aye," "nay," and "abstain" votes for the proposal as well as a summary of controverted issues and their resolution (45 CFR 46.115 (a) (2)).

Meeting minutes should contain the wording of any motion voted upon and the results of the motion.

Approval Process for Exempt, Expedited, and Full Reviews

The chairperson (or an experienced member designated by the chairperson) will review proposals submitted as qualifying for "Exempt" level. An additional IRB member will be asked to assist with "Limited Exempt" reviews, specifically under Exempt categories (2)(iii) and (3)(C) and (3)(iii) in order to determine that there are adequate provisions for protecting privacy and confidentiality. (See IRB Levels of Review – Appendix C)

Two standing IRB members will review proposals submitted as qualifying for "Expedited" level, and if a proposal is deemed by either person to require a full board review, it will be submitted to the full board.

Proposals not approved as Exempt or Expedited will not be disapproved, but will be referred to the Full IRB for consideration. Notification and reasons for modifications or referral will be provided in writing to the investigator(s). If the proposal is referred to the full board, the investigator may choose to modify the proposal prior to the meeting of the full board, as long as normal timelines for submission to the full committee are observed.

Approved Expedited or Full Board research proposals shall be for a period of one year, and an annual progress report shall be submitted by the investigators to the IRB for continuing review after one year.

Any research proposal deemed to contain a higher than minimal level of risk for physical or mental injury or for a breach in personal privacy shall be submitted to the Full IRB for review.

The **IRB CANNOT** give retroactive approval to a study that meets the definition of Human Research. The primary role of the IRB is to administer and monitor the federal protections of participants in research. The IRB cannot ensure that federal protections have been followed or enforced once the study is underway or has been completed, therefore the federal regulations do not have a provision for retroactive approval.

Notification of Approval/Disapproval

Written notification of approval or disapproval through the Exempt or Expedited formats shall be provided by the IRB administrator to the principal investigators and a copy kept by the IRB compliance administrator.

Written notification of approval or disapproval by Full Board Review, or of modifications required to secure IRB approval of the research activity, shall be sent by the Chair/Vice chair to the principal investigators, with copies to the IRB members.

If the IRB decides to disapprove research activity, it shall include in its written notification a statement of the reasons for its decision and give the investigator an opportunity to respond in person or in writing."(45 CFR 46.109 (d))

Modifications of Proposal

Once approved, a research protocol may not be modified without permission of the initial reviewer (Exempt and Expedited) or the Board (if Full review). The investigator should be reminded of this in writing at the time of approval.

Approval is for no more than one calendar year from the official date of approval. If data collection continues past that time, the proposal must be resubmitted with an annual progress report and a request for a continuation. The investigator should be reminded of this in writing at the time of approval. (45 CFR 46.109 (e)).

The IRB shall speak only to the issues of appropriate treatment of human subjects. Should any member of the board wish to provide feedback regarding other aspects of methodology, this should be clearly indicated as informal and not part of the approval process, and the member so involved should make clear that any change in methodology would require a resubmission of the proposal.

Records

A copy of the human subjects research policies, IRB meeting minutes, and research proposals received and action taken, shall be kept for at least three years. (45 CFR 46.115 (b)). Records of continuation shall include the initial approved proposal and approval for continuation. This filing does not preclude transmission of similar copies to the next chair or administrator.

Institutional Consent for Data Collection

Prior to conducting research using human subjects, the investigator shall provide a full description of the proposed research to the institutional representative where data is to be collected, and have this approved.

(1) When the institution where data is to be collected is other than Rocky Vista University, an indication/agreement of institutional consent should be provided with the proposal given to the IRB.

(2) When Rocky Vista University is the institution both for IRB approval and for data collection, IRB approval will constitute institutional consent.

ROLE of the IRB

The IRB must comply with HHS and FDA regulations in 45 CFR part 46 and 21 CFR parts 50 and 56, respectively, when reviewing research subject to those regulations. Both the HHS regulations at 45 CFR 46.103(b)(4) and (5) and the FDA regulations at 21 CFR 56.108(a) and (b) state that IRBs must follow procedures for the following functions and operations:

1. Conducting initial and continuing review of research and reporting findings and actions to the investigator and the institution;
2. Determining which projects require review more often than annually and determining which projects need verification from sources other than the investigator that no material changes have occurred since previous IRB review;
3. Ensuring prompt reporting to the IRB of proposed changes in a research activity and ensuring that changes in approved research, during the period for which IRB approval has already been given, may not be initiated without IRB review and approval except where necessary to eliminate apparent immediate hazards to the human subjects;
4. Ensuring prompt reporting to the IRB, appropriate institutional officials, and the department or agency head (i.e., OHRP) for research conducted or supported by HHS, and FDA for FDA-regulated research of any:
 - Unanticipated problems involving risks to human subjects or others;
 - Instance of serious or continuing noncompliance with the applicable HHS and FDA regulations or the requirements or determinations of the IRB;
 - Suspension or termination of IRB approval.

IRB Review of Potential Risks to Subjects

Potential risks fall into six broadly-defined categories. The IRB will weigh the potential risks of research against the potential benefits as part of the review process. Researchers are expected to take steps to minimize potential risks.

Physical Risks

Physical risks include physical discomfort, pain, injury, illness or disease brought about by the methods and procedures of the research. A physical risk may result from the involvement of physical stimuli such as noise, 5

electric shock, heat, cold, electric magnetic or gravitational fields, etc. Engaging a subject in a social situation which could involve violence may also create a physical risk.

Psychological Risks

Psychological risks include the production of negative affective states such as anxiety, depression, guilt, shock and loss of self-esteem and altered behavior. Sensory deprivation, sleep deprivation, use of hypnosis, deception or mental stresses are examples of psychological risks.

Social/Economic Risks

Social/Economic risks include alterations in relationships with others that are to the disadvantage of the subject, including embarrassment, loss of respect of others, labeling a subject in a way that will have negative consequences, or in some way diminishing those opportunities and powers a person has by virtue of relationships with others. Economic risks include payment by subjects for procedures not otherwise required, loss of wages or other income and any other financial costs, such as damage to a subject's employability, as a consequence of participation in the research.

Loss of Confidentiality

In all research involving human subjects, confidentiality of identifiable information is presumed and must be maintained unless the investigator obtains the express permission of the subject to do otherwise. Subjects have the rights to be protected against injury or illegal invasions of their privacy and to preservation of their personal dignity. The more sensitive the research material, the greater the care that must be exercised in obtaining, handling, and storing data. In order to minimize the risk for loss of confidentiality, investigators should only collect personal information that is absolutely essential to the research activity. If personal data must be collected, it should be coded as early in the activity as possible and securely stored so that only the investigator and authorized staff may access it. Identities of individual subjects must never be released without the express consent of the subject. In addition, if an investigator wishes to use data for a purpose other than the one for which it was originally collected and the data are still identifiable (e.g. a code list for the data still exists), the investigator may need to obtain consent from the subjects for the new use of the data.

Legal Risks

Legal risks exist when the research methods are such that the subject or others will be liable for a violation of the law, either by revealing that the subject or others have or will engage in conduct for which the subject or others may be criminally or civilly liable, or by requiring activities for which the subject or others may be criminally or civilly liable.

Considerations for Vulnerable Subjects

The IRB shall consider whether the study involves subjects that are likely to be vulnerable to coercion or undue influence, and if so, whether additional safeguards have been included to protect their rights and welfare. In addition, when pregnant persons, fetuses, and neonates, or prisoners (incarcerated individuals) are listed as subjects for research, a consultant with experience with these subjects will be included in the IRB's review.

INFORMED CONSENT

When reviewing research subject to the revised Common Rule, the RVU IRB will evaluate the provisions for informed consent as described with the below variations. Investigators conducting research subject to the revised Common Rule must adhere to these requirements.

General Requirements for Informed Consent [§45CFR 46.116(a)]

The following specific requirements for consent, whether written or oral, apply to research subject to the revised Common Rule:

1. Before involving a human subject in research, an investigator shall obtain the legally effective informed consent of the subject or the subject's legally authorized representative (LAR)
2. An investigator shall seek informed consent only under circumstances that provide the prospective subject or the LAR sufficient opportunity to discuss and consider whether or not to participate and that minimize the possibility of coercion or undue influence
3. The information that is given to the subject or the LAR shall be in language understandable to the subject or the LAR
4. The prospective subject or the LAR must be provided with the information that a reasonable person would want to have in order to make an informed decision about whether to participate, and an opportunity to discuss that information
5. Informed consent must begin with a concise and focused presentation of the key information that is most likely to assist a prospective subject or LAR in understanding the reasons why one might or might not want to participate in the research. This part of the informed consent must be organized and presented in a way that facilitates comprehension. Generally, the beginning of an informed consent should include a concise explanation of the following:
 - a. The fact that consent is being sought for research and that participation is voluntary;
 - b. The purposes of the research, the expected duration of the prospective subject's participation, and the procedures to be followed in the research;
 - c. The reasonably foreseeable risks or discomforts to the prospective subject;
 - d. The benefits to the prospective subject or to others that may reasonably be expected from the research; and
 - e. Appropriate alternative procedures or courses of treatment, if any, that might be advantageous to the prospective subject.

However, based upon the facts of an individual protocol, the IRB may require that different (or additional) information be presented at the beginning of an informed consent to satisfy this requirement.

Informed consent as a whole must present information in sufficient detail relating to the research, and must be organized and presented in a way that does not merely provide lists of isolated facts, but rather facilitates the prospective subject's or LAR's understanding of the reasons why one might or might not want to participate.

No informed consent may include any exculpatory language through which the subject or the LAR is made to waive or appear to waive any of the subject's legal rights, or releases or appears to release the investigator, the sponsor, the institution, or its agents from liability for negligence.

Elements of Consent – added to General Requirements

In addition to the elements of informed consent, the following additional elements are required for research subject to the revised Common Rule.

Basic Elements [§ .116(b)(9)]

1. One of the following statements about any research that involves the collection of identifiable private information or identifiable biospecimens:

- a. A statement that identifiers might be removed from the identifiable private information or identifiable biospecimens and that, after such removal, the information or biospecimens could be used for future research studies or distributed to another investigator for future research studies without additional informed consent from the subject or the legally authorized representative, if this might be a possibility; or
- b. A statement that the subject's information or biospecimens collected as part of the research, even if identifiers are removed, will not be used or distributed for future research studies.

Additional Elements (must be included when appropriate) [§ .116(c)]

1. A statement that the subject's biospecimens (even if identifiers are removed) may be used for commercial profit and whether the subject will or will not share in this commercial profit;
2. A statement regarding whether clinically relevant research results, including individual research results, will be disclosed to subjects, and if so, under what conditions;
3. For research involving biospecimens, whether the research will (if known) or might include whole genome sequencing (i.e., sequencing of a human germline or somatic specimen with the intent to generate the genome or exome sequence of that specimen).

Broad Consent [§ .116(d)]

The RVU IRB will not implement the new regulatory "Broad Consent" option as an informed consent process at this time. Exemptions 7 & 8, which rely on Broad Consent, also will not be implemented.

Waiver or Alteration of Informed Consent [§ .116(e) and (f)]

When reviewing research subject to the revised Common Rule, the IRB will evaluate requests for waivers or alterations of informed consent in accordance with the requirements and criteria specified in the revised rule and summarized below. The IRB's determination will be documented in the IRB record and communicated to the investigator via the project approval letter.

General Waiver or Alteration of Consent

In order to approve a request from an investigator to waive the requirement for informed consent, or to omit or alter one or more basic or additional element of consent (an "Alteration"), under this provision the RVU IRB must determine and document that the below criteria are satisfied.

1. The research involves no more than minimal risk to the subjects;
2. The research could not practicably be carried out without the requested waiver or alteration;
3. If the research involves using identifiable private information or identifiable biospecimens, the research could not practicably be carried out without using such information or biospecimens in an identifiable format;
4. The waiver or alteration will not adversely affect the rights and welfare of the subjects; and
5. Whenever appropriate, the subjects or LARs will be provided with additional pertinent information after participation.

Investigators may be asked to provide justification, or additional information or documentation, to support that the above criteria are satisfied.

Waiver or Alteration of Consent in Research Involving Public Benefit and Service Programs

In order to approve a request from an investigator to waive the requirement for informed consent, or to omit or alter one or more basic or additional element of consent (an "Alteration") under this provision, the RVU IRB must determine and document that the below criteria are satisfied:

1. The research or demonstration project is to be conducted by or subject to the approval of state or local government officials and is 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; or
- d. Possible changes in methods or levels of payment for benefits or services under those programs; and

2. The research could not practicably be carried out without the waiver or alteration.

Restrictions:

1. Waivers – a. If an individual was asked to provide broad consent for the storage, maintenance, and secondary research use of identifiable private information or identifiable biospecimens in accordance with the requirements and refused to consent, an IRB cannot waive consent for the storage, maintenance, or secondary research use of the identifiable private information or identifiable biospecimens.

2. Alterations – a. An IRB may not approve a request to alter or omit any of the general requirements for informed consent for public benefit or service programs.

Screening, Recruiting, or Determining Eligibility of Prospective Subjects

The revised Common Rule removes the requirement for partial waivers of consent for the use of information or specimens for the purposes of screening, recruiting, or determining the eligibility of prospective subjects for inclusion in the research. Pursuant to the revised rule, the RVU IRB may approve a research proposal in which an investigator will obtain information or biospecimens for these purposes without the informed consent of the prospective subject or the subject's LAR if either of the following conditions is met:

1. The investigator will obtain information through oral or written communication with the prospective subject or LAR, or
2. The investigator will obtain identifiable private information or identifiable biospecimens by accessing public records or stored identifiable biospecimens.

When research is subject to the revised Common Rule, and the above conditions are met, investigators do not have to request waivers of consent for the purposes of screening, recruiting, or determining eligibility but do have to describe the activities in the application or protocol submitted to the IRB. The above does not negate the requirements of other rules, such as HIPAA, when applicable. It also does not negate the requirement to obtain consent, or a waiver of consent, before involving a subject (including the use of their identifiable private information or biospecimens) in other research activities.

Documentation of Consent [§ .117]

The revised Common Rule modifies the requirements for documentation of consent as described below. When reviewing research subject to the revised Common Rule, the RVU IRB will apply the requirements summarized below.

Unless the requirement for documentation of consent is waived by the IRB, informed consent must be documented by the use of a written informed consent form (ICF) approved by the IRB and signed (including in an electronic format) by the subject or the subject's LAR. A written copy must be given to the person signing the ICF.

The ICF may be either of the following:

1. A written consent document that embodies the basic and required additional elements of informed consent. The investigator shall give either the subject or the subject's LAR adequate opportunity to read the informed consent form before it is signed; alternatively, this form may be read to the subject or the subject's legally authorized representative; or

2. A short form written consent document stating that the elements of informed consent have been presented orally to the subject or the subject's LAR and that the key information required by § .116(a)(5)(i) was presented first to the subject, before other information, if any, was provided. When this method is used:
 - a. The oral presentation and the short form written document should be in a language understandable to the subject; and
 - b. There must be a witness to the oral presentation; and
 - c. The IRB must approve a written summary of what is to be said to the subject (the approved full consent document may serve as this summary);
 - d. The short form document is signed by the subject;
 - e. The witness must sign both the short form and a copy of the summary; and
 - f. The person actually obtaining consent must sign a copy of the summary; and
 - g. A copy of the summary must be given to the subject or representative, in addition to a copy of the short form.

Waiver of Documentation of Informed Consent [§ .117(c)] The revised Common Rule adds a third condition under which an IRB may waive the requirement for an investigator to obtain a signed informed consent form. When reviewing research subject to the revised Common Rule, the RVU IRB may also approve a request for a waiver of documentation of consent if it finds that:

1. The subjects or LARs are members of a distinct cultural group or community in which signing forms is not the norm, that the research presents no more than minimal risk of harm to subjects, and provided there is an appropriate alternative mechanism for documenting that informed consent was obtained.

The IRB's determination will be documented in the IRB record and communicated to the investigator.

IRB Review of Grant Applications

The revised Common Rule removes the requirement that the IRB review the Federal grant application or proposal for consistency with the protocol submitted to the IRB. Unless required by the Federal department or agency conducting or supporting the research, or by foreign, state, or local laws or regulations (including tribal law), the RVU IRB will no longer require submission of, or conduct review of, Federal grant applications or proposals when research is subject to the revised Common Rule.

Posting of Clinical Trial Consent Forms [§ .116(h)]

The revised Common Rule includes a requirement for the posting of one IRB-approved consent form to a publicly available Federal website for each clinical trial conducted or supported by a Common Rule department or agency (such as the FDA) after the clinical trial is closed to recruitment, and no later than 60 days after the last study visit by any subject. This requirement may be satisfied by either the awardee or the Federal department or agency. If the Federal department or agency supporting or conducting the clinical trial determines that certain information should not be made publicly available on a Federal website (e.g., confidential commercial information), the department or agency may permit or require redactions to the information posted.

Appendices

- A. A2. A3.** RVU IRB Registration Information (Office of Human Research Protections) and Federal-wide Assurance
- B.** Research Protocol Approval Criteria – IRB Members
- C.** IRB Levels of Review – Full, Expedited, Exempt



United States Department of Health & Human Services
THE OFFICE FOR HUMAN RESEARCH PROTECTIONS

[New Search](#)

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IRB Organization Information

IORG0006156 - Rocky Vista University (Active)

Located at: Parker, COLORADO
Expires:02/07/2025

IRBs for this Organization: 2
[Agency Only Access](#)

IRB Name	City	State/Country	Status	IRB Type
IRB00007408 Rocky Vista University College of Osteopathic Medicine IRB #1 - Colorado	Parker	COLORADO	Active	OHRP/FDA
IRB00011973 Rocky Vista University IRB #2 - Clinical	Parker	COLORADO	Active	OHRP/FDA



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[New Search](#)

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Institutional Review Board Information

Parent Institution/Organization: [IORG0006156](#) - Rocky Vista University (Active)

Located at: Parker, COLORADO
Expires: 02/07/2025

IRB00007408 - Rocky Vista University College of Osteopathic Medicine IRB #1 • Colorado Campus (Active)

Located at: Parker, COLORADO
Membership Last Updated: 02/07/2022

Assurances Relying Upon this IRB

Total Records: 1 Total Pages: 1

Results per page: 20 ▾

[Agency Only Access](#)

Assurance #	Assurance Name	Loc
FWA00020371	Rocky Vista University	Parker COLORADO



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[New Search](#)

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Institutional Review Board Information

Parent Institution/Organization: [IORG0006156](#) - Rocky Vista University (Active)

Located at: Parker,
COLORADO
Expires: 02/07/2025

IRB00011973- Rocky Vista University IRB #2- Clinical (Active)

Located at:
Parker, COLORADO
Membership Last
Updated: 02/07/2022

Assurances Relying Upon this IRB

Total Records: 1 Total Pages: 1

Results per page: 20 v

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Assurance #	Assurance Name	Loc
FWA00027898	Rocky Vista University, LLC	Parker COLORADO

Research Protocol Approval Criteria for IRB MEMBERS

Appendix B

Circle: Exempt or Expedited or Full Review

Date: ___ / ___ / ___

IRB #: _____

Reviewer: _____

Risks to Participants are minimized.

- Risks include both the probability and magnitude of harm, including physical, psychological, social, legal, financial harms and/or other.
- Scientific review to determine that research design is sound:
 - Testable hypothesis
 - Adequate summary of the literature
 - Appropriate data collection to test hypothesis
 - Adequate description of statistical methods
 - Justification of sample size (power calculation)
- No unnecessary exposure to risks.
- Utilizes procedures already being performed for diagnostic or treatment purposes when possible.
- Risk Assessment:
 - Study qualifies as minimal risk (risks are comparable to those ordinarily encountered in daily life or routine medical care).
 - Study is greater than minimal risk
 - Direct benefit to participants
 - No direct benefit to participants

Risks to participants are reasonable in relation to anticipated benefits, if any, to participants, and the importance of the knowledge that may reasonably be expected to result.

- Anticipated benefits outweigh the expected risk
- When research is more than minimal risk, benefits must be maximized/risks minimized and justified by the scientific merit.
- Only consider those risks and benefits which may result from the research as distinguished from those of therapies the participant would receive even if not participating in the research.
- Possible long-range effects of applying knowledge gained in the research (e.g., changes in public policy) should not be considered among the research risks and benefits.

Selection of Participants is Equitable.

- If populations requiring special consideration will be involved, include the appropriate population checklist.
- Is participation restricted by age, gender, minority status, pregnancy status or other criteria and is that restriction justified by the nature of the research?
- Is the participant population compromised by taking into account the purposes of the research or the setting in which the research will take place?

Informed consent will be sought from each prospective participant or the participant's legally authorized representative or surrogate.

- Consent of participant, LAR, or surrogate will be obtained.
- Consent waived. Attached waiver of consent request.
- Are there third party participants? If so, will consent be obtained or waived?
- Is there deception involved? If so, is it justified by the research and will participants be debriefed after participation or study conclusion?
- Recruitment plan presents research accurately and does not over-emphasize compensation and/or benefits.

Informed consent will be appropriately documented.

- Full consent form to be signed by participant, LAR, or surrogate.
- Short form or online consent will be used.

- Qualifies for waiver of documentation of consent.

The research plan makes adequate provisions for monitoring the data collected to ensure the safety of participants.

- A formal Data and Safety Monitoring plan is not needed due to the nature of the research; PI will monitor the study and review data.
- Is a Data and Safety Monitoring Plan needed and included? Is it adequate based on the risk?
- Does the monitoring plan include provisions for incidental findings?

There are adequate provisions to maintain confidentiality.

- Are there risks that could be further minimized by better data confidentiality/security?
- Are all identifiers being collected necessary?
- Will identifiers/code be maintained after completion of the study and if so is this justified, and will the data be adequately secured?
- Will sensitive information be collected and retained? Should a Certificate of Confidentiality be pursued?

Does the study require review more often than annually?

- Is there uncertainty in the risks such that the IRB should review this project more frequently than annually?
- Are there other reasons to consider that the IRB review this project more frequently than annually?

Research studies have the resources necessary to protect participants:

- Adequate time for the researchers to conduct and complete the research
- Adequate number of qualified staff
- Adequate facilities
- Access to a population that will allow recruitment of the necessary number of participants
- Availability of medical or psychosocial resources that participants might need as a consequence of the research.

Initial Review of Research

The IRB Chair and IRB (Board) are charged with the initial review of a study and determining the type of review category under which a research proposal falls. It is the responsibility of the investigator to obtain approval from the IRB Chair prior to conducting a research study.

Research involving human subjects will fall into one of three overall categories: full review, exempt from review, or expedited review. A project may need to undergo a limited review before being placed in the exempt category in order to ensure that adequate privacy safeguards are in place regarding any identifiable private information. All research involving human subjects conducted by persons associated with Rocky Vista University, regardless of category of review or where the research is performed must be submitted to the IRB for review. If a research project will be published or presented for generalized knowledge (beyond the university), the proposal must go through the expedited or full review process as decided by the Chair.

Exempt Review

Some research projects involving human subjects are exempt from continuing review and oversight by the IRB once approved. However, the Board (or Chair) must review all proposed research and provide approval of the exemption to investigators. Investigators cannot determine on their own that their research is exempt. Certain types of research may qualify for exemption according to federal regulations contained in the [Department of Health and Human Services Code of Federal Regulations 45CFR46.101\(b\)](#). All applications that are not granted exempt status must receive expedited review or full board review. The IRB Chair is authorized to provide an exempt action. Consent of participating subjects may be required for exempt studies. Some exempt proposals may require investigators to obtain consent from the subjects. The Board may take such action in the interests of protecting subjects and encouraging investigators to become more familiar with the concept of informed consent. Proposals for research extending beyond one year must be resubmitted annually. In exempting proposals, the Board may require that, if the research is continuing, the proposal be resubmitted after one year. If no changes to the proposal are made, the researcher needs to address the progress of the research as noted under the “Annual Progress Report for Research” form.

Exempt Review Categories

(1) Research, conducted in established or commonly accepted educational settings, that specifically involves normal educational practices that are not likely to adversely impact students’ opportunity to learn required educational content or the assessment of educators who provide instruction. This includes most research on regular and special education instructional strategies, and research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

(2) Research that only includes interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), or survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording) if at least one of the following criteria is met:

(i) The information obtained is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained, directly or through identifiers linked to the subjects;

(ii) Any disclosure of the human subjects' responses outside the research would not reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, educational advancement, or reputation; or

(iii) The information obtained is recorded by the investigator in such a manner that the identity of the human subjects can readily be ascertained, directly or through identifiers linked to the subjects, and an IRB conducts a limited IRB review to make the determination required by Sec. 46.111(a)(7).

(3) (i) Research involving benign behavioral interventions in conjunction with the collection of information from an adult subject through verbal or written responses (including data entry) or audiovisual recording if the subject prospectively agrees to the intervention and information collection and at least one of the following criteria is met:

(A) The information obtained is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained, directly or through identifiers linked to the subjects;

(B) Any disclosure of the human subjects' responses outside the research would not reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, educational advancement, or reputation; or

(C) The information obtained is recorded by the investigator in such a manner that the identity of the human subjects can readily be ascertained, directly or through identifiers linked to the subjects, and an IRB conducts a limited IRB review to make the determination required by Sec. 46.111(a)(7).

(ii) For the purpose of this provision, benign behavioral interventions are brief in duration, harmless, painless, not physically invasive, not likely to have a significant adverse lasting impact on the subjects, and the investigator has no reason to think the subjects will find the interventions offensive or embarrassing. Provided all such criteria are met, examples of such benign behavioral interventions would include having the subjects play an online game, having them solve puzzles under various noise conditions, or having them decide how to allocate a nominal amount of received cash between themselves and someone else.

(iii) If the research involves deceiving the subjects regarding the nature or purposes of the research, this exemption is not applicable unless the subject authorizes the deception through a prospective agreement to participate in research in circumstances in which the subject is informed that he or she will be unaware of or misled regarding the nature or purposes of the research.

(4) Secondary research for which consent is not required: Secondary research uses of identifiable private information or identifiable biospecimens, if at least one of the following criteria is met:

(i) The identifiable private information or identifiable biospecimens are publicly available;

(ii) Information, which may include information about biospecimens, is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained directly or

through identifiers linked to the subjects, the investigator does not contact the subjects, and the investigator will not re-identify subjects;

(iii) The research involves only information collection and analysis involving the investigator's use of identifiable health information when that use is regulated under 45 CFR parts 160 and 164, subparts A and E, for the purposes of "health care operations" or "research" as those terms are defined at 45 CFR 164.501 or for "public health activities and purposes" as described under 45 CFR 164.512(b); or

(iv) The research is conducted by, or on behalf of, a Federal department or agency using government-generated or government-collected information obtained for nonresearch activities, if the research generates identifiable private information that is or will be maintained on information technology that is subject to and in compliance with section 208(b) of the E-Government Act of 2002, 44 U.S.C. 3501 note, if all of the identifiable private information collected, used, or generated as part of the activity will be maintained in systems of records subject to the Privacy Act of 1974, 5 U.S.C. 552a, and, if applicable, the information used in the research was collected subject to the Paperwork Reduction Act of 1995, 44 U.S.C. 3501 et seq.

(5) Research and demonstration projects that are conducted or supported by a Federal department or agency, or otherwise subject to the approval of department or agency heads (or the approval of the heads of bureaus or other subordinate agencies that have been delegated authority to conduct the research and demonstration projects), and that are designed to study, evaluate, improve, or otherwise examine public benefit or service programs, including procedures for obtaining benefits or services under those programs, possible changes in or alternatives to those programs or procedures, or possible changes in methods or levels of payment for benefits or services under those programs. Such projects include, but are not limited to, internal studies by Federal employees, and studies under contracts or consulting arrangements, cooperative agreements, or grants. Exempt projects also include waivers of otherwise mandatory requirements using authorities such as sections 1115 and 1115A of the Social Security Act, as amended.

(i) Each Federal department or agency conducting or supporting the research and demonstration projects must establish, on a publicly accessible Federal Web site or in such other manner as the department or agency head may determine, a list of the research and demonstration projects that the Federal department or agency conducts or supports under this provision. The research or demonstration project must be published on this list prior to commencing the research involving human subjects.

(6) Taste and food quality evaluation and consumer acceptance studies:

(i) If wholesome foods without additives are consumed, or

(ii) 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.

(7) Storage or maintenance for secondary research for which broad consent is required: Storage or maintenance of identifiable private information or identifiable biospecimens for potential secondary research use if an IRB conducts a limited IRB review and makes the determinations required by Sec. 46.111(a)(8).

(8) Secondary research for which broad consent is required: Research involving the use of identifiable private information or identifiable biospecimens for secondary research use, if the following criteria are met:

(i) Broad consent for the storage, maintenance, and secondary research use of the identifiable private information or identifiable biospecimens was obtained in accordance with Sec. 46.116(a)(1) through (4), (a)(6), and (d);

(ii) Documentation of informed consent or waiver of documentation of consent was obtained in accordance with Sec. 46.117;

(iii) An IRB conducts a limited IRB review and makes the determination required by Sec. 46.111(a)(7) and makes the determination that the research to be conducted is within the scope of the broad consent referenced in paragraph (d)(8)(i) of this section;

(iv) The investigator does not include returning individual research results to subjects as part of the study plan. This provision does not prevent an investigator from abiding by any legal requirements to return individual research results.

Expedited Review

Expedited review of research proposals can be performed by the IRB chair or a designated voting member(s) rather than by the entire IRB. The [Department of Health and Human Services Code of Federal Regulations 45 CFR 46.110](#) permit expedited review for certain kinds of research involving no more than minimal risk and for minor changes in approved research.

Continuing reviews are required for projects in this level of review. Research cannot be disapproved using the expedited process. However, review may be delayed until a proposal can be reviewed by a full IRB meeting, if necessary.

Research activities that (1) present no more than minimal risk to human subjects, and (2) involve only procedures listed in one or more of the categories listed below are usually categorized as expedited. The activities listed should not be considered of minimal risk simply because they are included on this list. Inclusion on this list merely means that the activity is eligible for review through the expedited review procedure when the specific circumstances of the proposed research involve no more than minimal risk to human subjects.

The expedited review procedure may not be used where identification of the subjects and/or their responses would reasonably place them at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, insurability, reputation, or be stigmatizing, unless reasonable and appropriate protections will be implemented so that risks related to invasion of privacy and breach of confidentiality are no greater than minimal. The expedited review procedure may not be used for classified research involving human subjects.

Expedited Review Categories

1. 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.

2. Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for non-research purposes (such as medical treatment or diagnosis).
3. Collection of data from voice, video, digital, or image recordings made for research purposes.
4. 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 subjects, 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 subjects, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these subjects, 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.
5. 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) uncannulated 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.
6. 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 subject or an invasion of the subject's privacy; (b) weighing or testing sensory acuity; (c) magnetic resonance imaging; (d) electro-cardiography, 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.
7. 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.
8. Continuing review of research previously approved by a convened IRB as follows: (a) 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 (b) where no subjects 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.

Full Board Review

Full Board review of proposed research is conducted at a convened meeting at which a majority of the membership of the IRB is present, including at least one member whose primary concerns are in nonscientific areas. Research that involves more than minimal risk may be required to go through full board review. All proposals that are not granted exempt or expedited review and all projects involving “vulnerable groups” (i.e., children/minors, institutionalized people, individuals with impaired decision-making ability) require a Full Board review. In both Colorado and Utah, a child is legally defined as a person who is under 18 years of age. Other projects that may involve more than minimal risk (e.g., sensitive questions, unusual interventions) to the subject also must have Full Board review.

For further questions or information, please contact the RVU IRB Compliance Administrator at: ldement@rvu.edu or 720-874-2481.

Revised Common Rule 45 CFR 46