Appendix I: PROCESS TO GET IRB APPROVAL

This section contains information on the process to get approval from Institutional Review Board (IRB) for research studies qualifying for full quorum review as well as for exemption.

1.0 UNDERSTANDING WHEN IRB REVIEW IS NEEDED

Every research activity involving human subjects needs prior approval from IRB before it can be initiated at SKMCH&RC. Every investigator should determine

- Whether an activity is research **AND** involves human subjects that must be reviewed by an IRB
- Whether it needs a review by the full quorum IRB **OR** the proposed activity is exempted from full quorum review

1.1 Is My Project Human Subject Research

This section provides guidance to investigators who may be uncertain if their study meets the definitions of human subject research. The guidance provided here is general and may not be specific enough for particular situations.

1.1.1 Human subjects research

The first question a researcher should consider with respect to IRB review is whether the research project fits the definition of human subject research. Following definitions will help in making this determination

1.1.2 Defining research

Research means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge.

Audits and service evaluations also employ systematic and rigorous methods, but these differ from research in that audit seeks to measure existing practice against evidence based standards, and service evaluation addresses local service issues. It is noteworthy to understand audits done for quality assurance purposes are different from clinical audits and outcome research.

1.1.3 Defining human subjects

1.1.3.1 A **"human subject"** is defined as, "a living individual about whom an investigator obtains (1) data through intervention or interaction with the individual, or (2) identifiable private information."

1.1.3.2 The definition extends to the use of human organs, tissue and body fluids from individually identifiable human subjects as well as to graphic, written, or recorded information derived from individually identifiable human subjects.

1.1.4 "Living individual" – "The specimen(s)/data/information must be collected from live subjects."

Specimens/information from subjects now deceased may not be human subjects.

1.1.5 **"About whom"** – "a human subject research project requires the data received from the living individual to be **about** the person."

1.1.6 **"Intervention"** – "includes physical procedures, manipulations of the subject, or manipulations of the subject's environment for research purposes."

1.1.7 **"Interaction"** – "includes communication between the investigator and the subject. This includes face-to face, mail, and phone interaction as well as other modes of communication."

1.1.8 **"Identifiable private information"** – "includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation is taking place," and "information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, medical record)."

1.1.9 **"Identifiable"** – means the information contains one or more data elements that can be combined with other reasonably available information to identify an individual (e.g. Medical Record Number).

1.1.9.1 Studies based on data that are individually identifiable but are also publicly available may not constitute human subjects research. However, the term "publicly available" is intended to refer to record sets that are truly readily available to the broad public, such as cancer statistics data, or federal health or educational statistics.

1.1.9.2 An investigator should not assume information qualifies as "publicly available" merely because it has been posted on an electronic website and can be accessed without authorization.

1.2 What type of IRB review is needed?

This section provides guidance to investigators to understand and determine what type of IRB review may be needed for their research project so that investigators can prepare IRB submission accordingly. IRB will finally determine what type of review is needed for a certain activity after having a look at the research project. Two common types of review are:

1.2.1 Exemption

Human subject research involving no more than minimal risk qualifies for exemption/grant of exempt status. It means that the proposed research activity is exempt from full quorum review by IRB, and no further correspondence is required. A review by IRB chairperson, and one of his designee is required and it is completed in two to four (2-4) weeks of submission. This type of review is applicable for secondary research uses of identifiable private information or identifiable bio specimens, if at least one of the following criteria is met:

(i) The identifiable private information or identifiable bio specimens are publicly available.
(ii) Information, which may include information about bio specimens, 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
(Please see decision chart)
Investigators should not make final determination that their research is exempt. IRB is an authorized body to make the final determination of exemption.

1.2.2 Full quorum review

If your activity is a research & involves living individuals about whom an investigator obtains

- data through intervention or interaction with the individual, or
- identifiable private information

(Please see decision chart)
It would require a full quorum review by IRB in a convened meeting with a quorum present.
The studies should secure a prior Scientific Review Committee (SRC) approval.

1.3 Does case report require IRB review?

A case report is a retrospective analysis of a case, to develop information to be shared for medical/educational purposes. If an investigator wishes to make a publication of case report, it should be reviewed by IRB. One designated IRB member and Chair IRB will review case report to assess that

i. It meets the definition of a case report,
ii. Appropriate informed consent has been obtained from the participant,
iii. Authors have anonymized the patient's details as much as possible and it does not contain any direct or indirect identifiers to allow information to be used alone or in combination with other information to identify an individual who is a subject of the information.
iv. If the patient is deceased, the authors must obtain consent from adult next of kin.
v. In case, it is not possible to obtain informed consent, authors should provide a reasonable justification for waiver of informed consent and must ensure that exhaustive attempts have been made to contact the patient/family. Authority to grant waiver of informed consent lies with IRB.
vi. Case report manuscript should not contain any illustrations which may lead to identification of participant

In writing a case report, collaboration among all the health care professionals (involved in care of the proposed case) should be encouraged. All authors must have made an individual contribution to the writing of the article and not just been involved with the patient's care. This practice is associated with significant increase in quality of publication and can prevent duplicate publication.

In order to prevent duplication in publication of case reports, a database of medical record numbers of cases reported in case reports has been established and can be accessed at given link (https://shaukatkhanum.org.pk/irb). Authors must consult this database to ensure that no duplicate publication is carried out.

Same data set may be used to prepare more than one case report reflecting on different aspects of the case in interest. However, an assessment by Medical Director will be carried out, in cases where duplicate publication is suspected or where two publications are of a similar nature. In case of a conflict, final decision will be made by the medical director.

2.0 HOW TO PREPARE FOR IRB

For making IRB submission, investigators should submit the following documents.

- **i.** IRB application
- **ii.** Research synopsis
- **iii.** Informed Consent Form (English & Urdu version) for patients, if applicable
- **iv.** Informed Consent Form (English & Urdu version) for healthy controls, if applicable
- **v.** Questionnaire/Clinical data collection forms/interview guide as applicable, if applicable
- **vi.** Itemized budget with the indication of the source of funding
- **vii.** A copy of the Investigator Brochure and any other available safety information
- **viii.** Information about payments and compensation available to subjects
- **ix.** The investigator's current curriculum vitae
- **x.** Conflict of interest declaration
- **xi.** Collaborator/Sponsor/Contract Research Organization undertaking (as applicable)
- **xii.** Material Transfer Agreement/Collaboration Agreement/Indemnity Insurance documentation, where applicable
- **xiii.** Waiver of informed consent (provide written justification for waiver request)

2.1 Prepare your study documents

IRB application form and other templates are listed below to help you prepare your study documents.

- IRB application Form
  (Online IRB application can be accessed at link: https://shaukatkhanum.org.pk/irb)
- Template for writing synopsis
- Template for developing informed consent
- Conflict of interest declaration form
- Template for collaborator Undertaking

3.0 MAINTAINING YOUR IRB APPROVAL

After IRB approval, you would need to maintain approval conditions. For this purpose, you would need to continue to correspond with IRB in following cases

3.1 Continuing review report

3.2 Final Report at time of study completion

3.3 Amendment (changes in study protocol)

If you wish to make any amendments in research study which is already IRB approved, kindly submit a letter addressing chairperson IRB, summarizing the proposed amendments. Also include in your letter, how it can affect study risk-benefit ratio. Also, submit a revised proposal incorporating the amendment. In case the risk benefit ratio is affected by the amendment, IRB may seek further information or documents, as appropriate.

3.4 Notifications of adverse events

Adverse events should be reported using adverse event reporting form