REPORTABLE NEW INFORMATION FORM

INSTRUCTIONS TO STUDY PERSONNEL

Federal regulations require investigators to report to the IRB any information that may be considered an unanticipated problem involving risks to subjects or others. In the electronic IRB submission system, these problems reports are submitted under the "Reportable New Information" (RNI) option.

Please Note: When an investigator brochure, package insert, or device labeling is revised to indicate an increase in the frequency or magnitude of a previously known risk, or to describe a new risk, it must be submitted to the IRB for review. **These documents should be submitted in the eIRB system as a Modification and not as an RNI.** They must be submitted as a Modification so that they can be accessed as IRB-approved documents in the Documents tab of the study.

The following items should be reported as an RNI in the eIRB system:

1) Information that indicates a new or increased risk, or a potential safety issue. For example:
   a) New information (e.g., an interim analysis, safety monitoring report, publication in the literature, sponsor report, or investigator finding) indicates an increase in the frequency or magnitude of a previously known risk, or uncovers a new risk.
   b) Withdrawal, restriction, or modification of a marketed approval of a drug, device, or biologic used in a research protocol
   c) Protocol violation that harmed subjects or others or that indicates subjects or others might be at increased risk of harm
   d) Complaint of a subject that indicates subjects or others might be at increased risk of harm or at risk of a new harm
   e) Any changes significantly affecting the conduct of the research

2) Any harm***** experienced by a subject or other individual, which in the opinion of the investigator are **unexpected** and **probably related** to the research procedures.
   a) A harm is "**unexpected**" when its specificity or severity are inconsistent with risk information previously reviewed and approved by the IRB in terms of nature, severity, frequency, and characteristics of the study population.
   b) A harm is "**probably related**" to the research procedures if in the opinion of the investigator, the research procedures more likely than not caused the harm.

3) Non-compliance with the federal regulations governing human research or with the requirements or determinations of the IRB, or an allegation of such non-compliance.**

4) Audit, inspection, or inquiry by a federal agency.

5) Certain written reports of study monitors. *(Prompt reporting (within 5 days) is required for monitoring reports for which the industry sponsor determines the findings could affect the safety of participants or influence the conduct of the study.)*

6) Failure to follow the protocol due to the action or inaction of the investigator or research staff if the non-compliance causes harm, increases risk of harm, adversely affects the rights and welfare of participants or undermines the scientific integrity of the data.**

7) Potential breach of confidentiality (e.g., unauthorized access or release of data, lost study records, lost laptop)

8) Change to the protocol taken without prior IRB review to eliminate an apparent immediate hazard to a subject.

9) Incarceration of a subject in a study not approved by the IRB to involve prisoners.

10) Complaint of a subject that cannot be resolved by the research team.

11) Premature suspension or termination of the research by the sponsor, investigator, or institution.

12) Unanticipated adverse device effect (any serious adverse effect on health or safety or any life-threatening problem or death caused by, or associated with, a device, if that effect, problem, or death was not previously identified in nature, severity, or degree of incidence in the investigational plan or application (including a supplementary plan or application), or any other unanticipated serious problem associated with a device that relates to the rights, safety, or welfare of subjects.)

13) Any other unanticipated problem that involves potential risk to subjects or potential impact on the conduct of the study (e.g., disruption of drug availability, equipment malfunction, randomization error, loss of funding, data integrity concern)

***Reports of adverse drug events (whether internal or external) should be reported under Category 2 above, if they meet one or more of the criteria described below:**

1) All internal adverse drug events, serious or non-serious, that are unexpected **and** that are judged by the KUMC principal investigator or study sponsor to be related or probably related to participation in the research;
   a) "Unexpected" events are those that differ in nature, severity or frequency from risk information previously reviewed and approved by the IRB.
   b) "Related or probably related" events are those that are, in the opinion of the KUMC investigator, more likely than not attributable to study participation. In determining whether the event is likely attributable to study participation, the KUMC investigator uses his or her expertise about the condition under study, experience with the study drug, available data from related studies, and information from the study sponsor in the case of multi-center trials. The KUMC investigator also evaluates the temporal relationship with study interactions or interventions and whether symptoms decrease or disappear when a test article is withdrawn. Events are not considered to be related if they are judged to be caused by the clinical state or clearly attributable to unrelated circumstances; or
2) Adverse drug events that are expected in some subjects, but are determined to be occurring at a significantly higher frequency or severity than expected; or
3) Other unexpected adverse drug events, regardless of severity, that may alter the IRB's analysis of the risk versus potential benefit of the research and as a result warrant consideration of changes to the research protocol or informed consent process/document.
4) External adverse events or new information from a multi-center trial where the sponsor has determined that the event or new information constitutes an unanticipated problem involving risk to subjects or others and is implementing corrective actions such as changing the protocol, revising eligibility criteria, enhancing safety monitoring or updating informed consent

documents. If the report involves an individual external event occurring in a multi-center trial, it should be accompanied by supporting information from the study sponsor. The supporting information must clarify (a) why the event potentially represents an unanticipated problem involving risk to subjects or others; and (b) the sponsor's plan of action to address the problem. External adverse events without such supporting information may be returned without review.

***The death of a study subject is considered a harm, and reportable under Category 2, if it meets the following criteria:**

1) *Projects involving a study drug/biologic*
   a) Death of a KUMC subject that occur within thirty days of the last dose of study drug/biologic must be reported verbally or by fax within 24 hours of notification to the PI or research team, followed by a written report within five working days.
   b) Death of a KUMC subject that occurs more than thirty days after the last dose of study drug/biologic, that may be related to the study drug/biologic, must be reported within five working days of notification.

2) *Projects involving a study device*
   a) Death of a KUMC subject that may be related to the study device must be reported verbally or by fax within 24 hours of notification to the PI or research team.
   b) A written report must follow within five working days.

3) *Projects that do not involve a test article*
   a) Death of a KUMC subject in a project that does not involve a drug, biologic or device must be reported within five working days of notification if the death may be related to study participation.

4) The death of a non-KUMC subject is reportable if (1) it is not expected given the nature of the research procedures and the subject population; (2) it is related to the research, and (3) it suggests that the research places subjects or others at greater risk of harm than was previously known or recognized.

***Supporting Documents for Adverse Events**

Investigators should attach supporting documents that explain the event and indicate whether or not the information indicates that subjects may be at increased risk of harm than previously recognized. For adverse events occurring in a multi-site trial, the supporting documents should indicate:

- the sponsor's determination that the event is potentially an unanticipated problem
- the sponsor's plan of action to address the problem.

Reports on multi-center trials that do not provide the above information may be returned without review.

****Reports of Non-Compliance**

Prompt reporting (within 5 days of the study team's awareness) is required for non-compliance that causes harm, increases risk of harm, adversely affects the rights and welfare of participants or undermines the scientific integrity of the data. Examples of events that must be reported include, but are not limited to:

1) Enrolling an ineligible subject
2) Dosing errors
3) Failure to monitor subject's study drug compliance
4) Failure to obtain informed consent
5) Failure to involve an interpreter/witness when consenting a non-English speaking subject
6) Omitting or modifying protocol-required activities if the non-compliance causes harm, increases risk of harm, adversely affects the rights and welfare of participants or undermines the scientific integrity of the data.
7) Modifying the protocol without IRB approval, except to avoid immediate harm to subjects
8) Conducting the research prior to IRB approval, during an IRB suspension or after IRB approval expires
9) Unapproved investigators working on the study
10) Monitoring reports for which the industry sponsor determines the findings could affect the safety of participants or influence the conduct of the study. Please note that monitoring reports without a specific verification from the sponsor may be returned without review.

Reporting Time Frames

1) Except for study deaths described above, internal problems must be reported to the IRB within **five** working days.
2) External problems requiring prompt reporting must be reported to the IRB within **twenty** working days.

Review by IRB Staff and the IRB

1) The IRB staff will review the submission to confirm that the report is complete and that the information meets reporting criteria.
2) The IRB staff may request additional information to facilitate the review.
3) If the information indicates that subjects are at immediate risk of harm, the IRB Chair or Vice Chair will be notified to consider study suspension or other actions to ensure the subjects' safety and welfare.
4) Information that meets reporting criteria will be placed on the agenda for an upcoming IRB meeting.
5) Information that does not meet reporting criteria may be returned without review.