Columbia University Human Research Protection Office/IRBs

Newsletter#8 – April 2024

Administrative modifications

Modifications to a non-exempt IRB protocol that are administrative in nature can be identified as such when completing the modification submission. Senior HRPO staff who are appointed as IRB members review and approve these types of modifications, regardless of the protocol's initial level of review.

A "*yes*" response to the question *"Does this modification include only administrative changes*?" included in the modification information will flag a modification as being "*administrative*" in the IRB submission queue. Accurately identified administrative modifications may be able to be reviewed within 1-2 business days.

Below are examples of administrative modifications:

- Personnel changes
- Translated documents
- Correction of a spelling error in a consent form or other documents
- Attachment of an executed MTA/DUA with no change in protocol
- Update of a consent form/recruitment materials to reflect change in personnel or correction of the document's header/footer
- Attachment of IRB approval documentation from an external site

The following changes are NOT administrative in nature:

- Adding a new or updated consent form/information sheet
- Adding questions to a questionnaire
- Adding a new population
- Increasing target enrollment numbers
- Adding/removing eligibility criteria
- Adding/removing a test or any research procedure
- Submitting an updated protocol, Investigator's Brochure or device manual

Ancillary review

Many protocols submitted to the IRB for review will, when needed, undergo concurrent review by another Columbia University research compliance office/committee (i.e., ancillary review). The IRB protocol will be routed within Rascal to the relevant ancillary reviewers based on the information you entered in Rascal and/or based on the attachment of a HazMat appendix to your IRB protocol. The requirements for ancillary reviews are listed below**. Note that anytime review by an ancillary committee is needed, the IRB will not be able to approve the protocol until that ancillary review committee or reviewer has granted their final approval.**

Ancillary Reviewers:

- **Review by the Herbert Irving Comprehensive Cancer Center's Protocol Review and Monitoring Committee (PRMC):**

If you indicate in the IRB application that the research is cancer-related and you select one of the 5 options *below**, the protocol will be automatically routed to the PRMC queue for review upon log in of the Event (e.g., Protocol, Modification, Renewal, etc.) by HRPO staff.

**Options in Rascal:*

- *Involves an intervention designed to diagnose, treat, prevent, or provide supportive care to subjects with or at risk of developing a form of cancer.*
- *Uses specimens or patient information to assess cancer risk, clinical outcomes or response to therapies.*
- *Utilizes observation or surveillance (no intervention or alteration of patient status).*
- *Examines outcomes of healthy populations and cancer patients.*
- *Evaluates the delivery, processes, management, organization or financing of cancer care.*

Investigator-initiated new protocols, as well as renewals, annual reports and modifications, will not be reviewed by the IRB until PRMC approval is granted. Industry-sponsored new protocols will be distributed for IRB review before PRMC approval, however IRB approval will be granted only after PRMC approval. PRMC review may be expedited, i.e., one reviewer, or require convened review, depending on the nature of the submission.

- **Review by the Institutional Biosafety Committee (IBC) or Biosafety Officers in Environmental Health & Safety (EH&S)**

When you have attached Appendix A, D, E, I or M to your IRB Protocol or other Event, its review by the Biosafety Officers at EH&S and/or the IBC will be initiated upon submission of the Event to the IRB.

If significant changes to the Appendix are needed, the Appendix will be put on hold by an EH&S staff or IBC member. HRPO staff will return the protocol to you and will forward the EH&S correspondence describing the changes needed on the Appendix. HRPO staff will determine, considering the level of review, if it is best to return the Event to correct the appendix before or after IRB review. Final IRB approval will not be granted until the Appendix has been approved by EH&S and/or the IBC.

Below is a brief description of each appendix reviewed by EH&S and/or the IBC:

- **Appendix A - Infectious Agents**

  Infectious Agents refers to human pathogens, which generally require biosafety level 2 or higher containment. Investigators must attach an Infectious Agents (Appendix A) for clinical trials for (1) isolation of infectious agents from human subjects, or (2) administration of infectious agents to human subjects that do not involve human gene transfer (for example live vaccine administration). Questions about Appendix A should be directed to biosafety@columbia.edu.

- **Appendix D – Laser**

An Appendix D is required if you will use a class 3B or 4 laser. LASERS (Light Amplification by Stimulated Emission of Radiation) are divided into four major hazard classes (1 to 4) depending on the potential for causing biological damage to the eye or skin. Class 3B, intermediate to moderate power lasers, and Class 4, high power lasers, are potential health hazards and require special control measures. (Note: Class III lasers have two sub-classes, Class 3B and Class 3R). Before using a Class 3B or 4 laser you should develop a written standard operating procedure and ensure that adequate safety measures are taken into consideration.
Questions about Appendix D should be directed to lasersafety@columbia.edu.

- **Appendix E - Hazardous Chemicals**

If human subjects research involves the handling or use of known or suspected carcinogens, mutagens, reproductive hazards, acutely toxic or other significantly hazardous chemicals, these should be added to a Hazardous Chemicals Appendix E. Note, this is not a complete list of all chemicals/substance that may/may not require an Appendix E.
Common chemicals may include, but are not limited to: Acutely toxic materials (e.g. arsenic, cyanide, nicotine) - Neurotoxic materials (e.g. MPTP) - Carcinogens (e.g. ENU, MNU, azoxymethane) - Mutagens/teratogens - Male/female reproductive toxin, (e.g. BrdU, tamoxifen) - Heavy metals (e.g. mercury, cadmium, chromium, silver, lead) - Other chemicals that may be toxic to target organs (e.g. streptozotocin, carbon tetrachloride) - Chemotherapy agents (e.g. mitoxantrone, 5-FU) - Biological toxins (e.g., diphtheria, tetanus, pertussis, botulinum, tetrodotoxin).

- **Appendix E2 – Formaldehyde**

An Appendix E2 should be attached if human subjects will be exposed to Formaldehyde/Formalin/ Paraformaldehyde during the course of protocol activities.
Assistance with Appendices E and E2 or questions about whether to include a chemical should be directed to: occusafety@columbia.edu.

- **Appendix I - Controlled Substances**

An Appendix I is required when the research involves the use of any Schedule I controlled substances listed in the Drug Enforcement Administration (DEA) Orange Book: https://www.deadiversion.usdoj.gov/schedules/orangebook/c_cs_alpha.pdf.
These are controlled substances that are unapproved by the FDA (e.g. LSD). Investigators must hold a DEA schedule I researcher license and the controlled substances must be identified as an IND or a notice of claimed investigational exemption for a New Drug for clinical studies must be provided. Use of Schedule II to V controlled substances (e.g. Oxycontin) in IRB protocols does not require submission of Appendix I.
Questions about Appendix I should be directed to controlled@columbia.edu.

- **Appendix M - Use of Recombinant DNA (rDNA) Molecules in Human Gene Transfer**

Human Gene Transfer (HGT) is the deliberate transfer into human subjects of either:
1. Recombinant nucleic acid molecules, or DNA or RNA derived from recombinant nucleic acid molecules, or
2. Synthetic nucleic acid molecules, or DNA or RNA derived from synthetic nucleic acid molecules, that meet any one of the following criteria:
    a. Contain more than 100 nucleotides; or
    b. Possess biological properties that enable integration into the genome (e.g., cis elements involved in integration); or
    c. Have the potential to replicate in a cell; or
    d. Can be translated or transcribed.; or

e. Have the potential to edit genes in human cells treated in vivo or ex vivo (e.g. an oligonucleotide guide RNA and Cas9 protein in a lipid nanoparticle introduced directly to human subjects or used to treat cells that are then introduced to human subjects).

Examples of HGT research subject to institutional review include introduction of:

- Lipid nanoparticle mRNA vaccines
- Adenoviral vector vaccines
- Adeno-associated viral vectors
- Oncolytic herpes viral vectors
- CAR-T cells transduced with a lentiviral vector
- Cells edited with CRISPR-Cas9

Questions about Appendix M should be directed to biosafety@columbia.edu.

- **Review by the Joint MR Safety Committee (MRSC)**

An MRI Human Scanning Appendix (**Appendix R**) is needed when proposed magnetic resonance scanning procedures are considered to be either beyond that established for the applicable standard of care (SOC), or both within and beyond that established for the applicable SOC, and any of the following are true for the study:

1. Healthy pregnant subjects will be enrolled and will undergo MR scanning procedures
2. Healthy minor subjects will be enrolled and will undergo MR scanning procedures
3. New or custom (i.e., non-FDA approved) imaging equipment will be used
4. Non-manufacturer provided pulse sequences used will exceed the 'Normal Mode' or, for scanning of healthy subjects, the scanner '1st Level Control Mode'.

Questions about Appendix R should be directed to mri-appendixrs@lists.cumc.columbia.edu

When **Appendix R** is attached to your protocol, its review by the MRSC will be activated upon assignment and login of the protocol by the IRB. If significant changes to the Appendix are needed, the Appendix will be put on hold by EH&S staff or the MRSC reviewer. Rascal will not allow approval of a protocol without prior approval by the MRSC.

- **Review by the Human Use Subcommittee (HUS) of the Joint Radiation Safety Committee (JRSC)**

An Appendix H is required when the research involves the use of ionizing radiation, or radiation therapy, in human subjects beyond that established for the applicable standard of care.

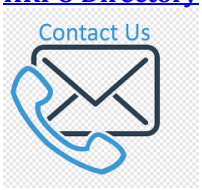
When you have attached an Appendix H to your IRB protocol, its review by the JRSC will be initiated upon submission of the event. Rascal will not allow approval of the protocol without prior approval by JRSC. Questions about Appendix H should be directed to jrsc@columbia.edu.

- **Review by the FCOI Committee: Conflict of Interest in Research**

COI disclosures with positive responses are reviewed by the Office of Research Compliance and Training (ORCT) and, when required, by the FCOI Committee. The COI review is initiated upon log in of the IRB protocol. The IRB will not review the initial application of a Protocol, Renewal or Modification until the COI disclosure has been cleared. The disclosure information and ORCT and/or FCOI determination notes will be made available to IRB reviewers during their review. The IRB may impose additional requirements to manage the COI if necessary.

HRPO Staff: Contact Information

HRPO Directory



HRPO main telephone number: 212.305.5883.
This phone line is answered by HRPO Staff during normal business hours.
For calls outside of normal business hours, please leave a message and HRPO Staff will respond on the next business day.

Tips on How Best to Contact HRPO Staff

If you have not yet submitted the protocol in Rascal and/or have specific questions about how to submit a new protocol	For research originating from CUIMC: Please contact IRB Liaison, Tasha Smith, at ts2257@cumc.columbia.edu or 929-996-1455. For research originating from the Morningside and Lamont-Doherty campuses: Please email askirb@columbia.edu
If you need a determination letter posted in Rascal or documents stamped for an approved event (these documents are expected to be available approximately one week following approval of the event)	Add a protocol-specific correspondence in Rascal Or **Email the IRB Specialist assigned to your protocol (see above HRPO Directory)**
If you have questions about the conduct of an IRB-approved study or to clarify an IRB request before resubmission	Add a correspondence in Rascal Or **Email your questions to the HRPO team assigned to your protocol (see above HRPO Directory) or ask for a phone consultation**
General questions not related to a specific protocol	Email irboffice@columbia.edu
Questions about reliance	Email irbreliance@cumc.columbia.edu
Questions about emergency use or subject safety issues	Contact Laurence Butaud-Rebbaa at lb2643@cumc.columbia.edu or 917-679-3867

HRPO Staff Updates

- **Welcome** to Meena Seetharaman and Shannon Strohmeyer who recently joined the HRPO team, respectively as IRB Specialist for the reliance team and IRB Specialist for the convened IRBs.

- **Congratulations** to Jenilee Soto, promoted to IRB 3 Manager. She will transition from IRB 4 to IRB 3 effective April 22, 2024.

- Victoria Mercer, IRB 5 Manager, is no longer with the HRPO. We wish her well in her new endeavors.

Upcoming Presentations

Workshops (via Zoom):
To register, please follow the link provided below for each workshop:

IRB Rascal Workshop: Consent Form Builder
Monday, April 22, 2024, 3:00 PM-4:00 PM

IRB Rascal Workshop: New Protocol (Greater than Minimal Risk)
Monday, May 20, 2024, 3:00 PM-4:00 PM

IRB Rascal Workshop: Renewal/Annual Report/Modification
Monday, June 24, 2024, 3:00 PM-4:00 PM

IRB Rascal Workshop: New Protocol (Minimal Risk)
Monday, July 22, 2024, 3:00 PM-4:00 PM

IRB Rascal Workshop: Consent Form Builder
Monday, August 26, 2024, 3:00 PM-4:00 PM

Recent Presentations

Monthly Investigator Meetings (MIM)
Slides of recent MIM presentations are available on the HRPO website (Informational Materials) at https://research.columbia.edu/human-subjects-protection-training-program-educational-resources

Please contact us with any questions and/or feel free to provide us with feedback at irboffice@columbia.edu.