Policy:
It is the policy of the UC Irvine (UCI) Institutional Review Board (IRB) to grant a waiver from informed consent for research or an exception from informed consent for qualifying planned emergency research in accordance with the Federal regulations and IRB policies and procedures.

Generally, the IRB must assure that provisions are made to obtain legally effective informed consent prospectively from each research participant or the participant’s legally authorized representative. There are only four circumstances under which the regulations give the IRB authority to waive the required informed consent.

I. **Option One:** Waiver for Research Activities Designed to Study Certain Aspects of Public Benefit or Service Programs
   A. The IRB may approve a consent procedure, which does not include, or which alters, some or all of the required elements of informed consent (See IRB Policy 31), or waive the requirement to obtain informed consent entirely provided the research is not subject to the FDA regulations and the IRB finds and documents that:
      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.

II. **Option Two:** Waiver for Minimal Risk Studies
   Additionally, the IRB may approve a consent procedure, which does not include, or which alters, some or all of the required elements of informed consent (See IRB Policy 30), or waive the requirements to obtain informed consent entirely provided that the IRB finds and documents that:
   A. The research or clinical investigation involves no more than minimal risk to the participant; and
   B. The waiver or alteration will not adversely affect the rights and welfare of the participants; and
   C. The research could not practicably be carried out without the waiver or alteration; and
   D. Whenever appropriate, the participants will be provided with additional pertinent information after participation or
   E. The IRB may waive the documentation of consent for some of all of the participants if the research involves no more than minimal risk and written consent would normally not be required outside of the research context.
   F. Common waiver scenarios regulated by the FDA may include the following:
1. FDA Enforcement Discretion for In Vitro Diagnostics: Under FDA’s regulations governing the conduct of in vitro diagnostic (IVD) device studies, the definition of “subject” includes individuals on whose specimens an investigational device is used [see 21 CFR 812.3(p)]. This means that this research is subject to FDA regulations and thus a waiver of consent cannot be granted. The FDA believes that it is possible in certain circumstances for IVD device investigations to be conducted using leftover specimens obtained without informed consent while protecting the human subjects who are the source of such specimens. The FDA intends to exercise enforcement discretion as to the informed consent requirements for clinical investigators, sponsors, and IRBs if an in vitro diagnostic device investigation is performed and all of the following are true:

   a. The investigation meets the IDE exemption criteria at 21 CFR 812.2(c) (3): A diagnostic device, if the testing:
      i. (i) Is noninvasive,
      ii. (ii) Does not require an invasive sampling procedure that presents significant risk,
      iii. (iii) Does not by design or intention introduce energy into a subject, and
      iv. (iv) Is not used as a diagnostic procedure without confirmation of the diagnosis by another, medically established diagnostic product or procedure.
   b. The study uses leftover specimens, that is, remnants of specimens collected for routine clinical care or analysis that would have been discarded. The study may also use specimens obtained from specimen repositories or leftover specimens that were previously collected for other research purposes.
   c. The specimens are not individually identifiable, i.e., the identity of the subject is not known to and may not readily be ascertained by the investigator or any other individuals associated with the investigation, including the sponsor. If the specimen is coded, it will be considered to be not individually identifiable if neither the investigator(s) nor any other individuals associated with the investigation or the sponsor can link the specimen to the subject from whom the specimen was collected, either directly or indirectly through coding systems.
   d. The specimens may be accompanied by clinical information as long as this information does not make the specimen source identifiable to the investigator or any other individual associated with the investigation, including the sponsor.
   e. The individuals caring for the patients are different from and do not share information about the patient with those conducting the investigation.
   f. The specimens are provided to the investigator(s) without identifiers and the supplier of the specimens has established policies and procedures to prevent the release of personal information.
   g. The study has been reviewed by an IRB.

2. A post approval observational study that utilizes access to medical records for information on safety or efficacy of the marketed drug or device.

III. **Option Three:** Exception from Informed Consent Requirements for Planned Emergency Research Subject to FDA Regulation

**NOTE:** Do not confuse Planned Emergency Research with Emergency Use of Test Article (Investigational FDA-Regulated Products) in a Life Threatening situation – See IRB Policy 45.

The IRB may review and approve a clinical investigation without requiring informed consent of all research subjects be obtained if the IRB (with the concurrence of a licensed physician who is a
member of or consultant to the IRB and who is not otherwise participating in the clinical investigation) finds and documents each of the following:

A. The target population for the research is in a life-threatening situation, available treatments are unproven or unsatisfactory, and the collection of valid scientific evidence, which may include evidence obtained through randomized placebo-controlled investigations, is necessary to determine the safety and effectiveness of particular interventions.

B. Obtaining informed consent is not feasible because:
   1. The subjects will not be able to give their informed consent as a result of their medical condition;
   2. The intervention under investigation must be administered before consent from the subjects' legally authorized representatives is feasible; and
   3. There is no reasonable way to identify prospectively the individuals likely to become eligible for participation in the clinical investigation.

C. Participation in the research holds out the prospect of direct benefit to the subjects because:
   1. The subjects are facing a life-threatening situation that necessitates intervention;
   2. Appropriate animal and other preclinical studies have been conducted, and the information derived from those studies and related evidence support the potential for the intervention to provide a direct benefit to the individual subjects; and
   3. The risks associated with the investigation are reasonable in relation to what is known about the medical condition of the potential class of subjects, the risks and benefits of the proposed intervention or activity.

D. The clinical investigation could not practicably be carried out without the waiver.

E. The proposed investigational plan defines the length of the potential therapeutic window based on scientific evidence, and the Investigator has committed to attempting to contact a legally authorized representative for each subject within that window of time and, if feasible, to asking the legally authorized representative contacted for consent within that window rather than proceeding without consent. The Investigator must agree to summarize efforts made to contact legally authorized representatives and make this information available to the IRB at the time of continuing review.

F. The IRB has reviewed and approved informed consent procedures and an informed consent document consistent with Federal regulations and IRB policies and procedures. The informed consent procedures and the informed consent document are to be used with subjects or their legally authorized representatives in situations where use of such procedures and documents is feasible.

G. Additional protections of the rights and welfare of the subjects will be provided, including, at least:
   1. Consultation (including, where appropriate, consultation carried out by the IRB) with representatives of the communities in which the clinical investigation will be conducted and from which the subjects will be drawn;
   2. Prior to the initiation of the clinical investigation, public disclosure to the communities in which the clinical investigation will be conducted and from which the subjects will be drawn of plans for the investigation and its risks and expected benefits;
   3. At the completion of the clinical investigation there are plans for public disclosure of sufficient information to apprise the community and researchers of the study. The information must include the demographic characteristics of the research population and results of the clinical investigation.
   4. Establishment of an independent data and safety monitoring committee to exercise oversight of the clinical investigation; and
   5. If obtaining informed consent is not feasible and a legally authorized representative is not reasonably available, the Investigator must commit to attempting to contact within the therapeutic window, the subject's family member who is not a legally authorized
representative, and asking whether he/she objects to the subject’s participation in the clinical investigation. The Investigator will summarize efforts made to contact family members and make this information available to the IRB at the time of continuing review.

H. Procedures must be in place to inform, at the earliest feasible opportunity, each subject, or if the subject remains incapacitated, a legally authorized representative of the subject, or if such a representative is not reasonably available, a family member, of the subject’s inclusion in the clinical investigation, the details of the investigation and other information contained in the informed consent document, specifically that the he/she may discontinue the subject’s participation at any time without penalty or loss of benefits of which the subject is otherwise entitled.

I. If a legally authorized representative or family member is told about the clinical investigation and the subject’s condition improves, the subject is also to be informed as soon as feasible.

J. If a subject is entered into a clinical investigation with waived consent and the subject dies before a legally authorized representative or family member can be contacted, information about the clinical investigation is to be provided to the subject’s legally authorized representative or family member, if feasible.

K. All clinical investigation records, including regulatory files, must be maintained for at least 3 years after the completion of the clinical investigation and will be accessible for inspection and copying by the regulatory authorities, as applicable.

L. Clinical investigations that are granted an exception to the informed consent requirement under this section must be performed under a separate investigational new drug application (IND) or investigational device exemption (IDE) that clearly identifies that the clinical investigation may include subjects who are unable to consent. The submission of these clinical investigations to the FDA for a separate IND/IDE is required even if an IND for the same drug product or an IDE for the same device already exists. Applications for this IND/IDE may not be submitted as an amendment to the existing IND/IDE.

M. If the IRB determines it cannot approve a request for exception from informed consent requirements in planned emergency research because the clinical investigation does not meet the criteria according to Federal regulations, IRB policies and procedures, or other relevant ethical concerns, the IRB must document its findings and provide these findings promptly in writing to the Lead Researcher who will forward to the sponsor of the clinical investigation.

IV. Option Four: Planned Emergency Research Not-Subject to FDA Regulations

The IRB Committee determines:

A. The research does not meet FDA regulations in 21 CFR 50; and

B. Items A-G as stated in option three above are met.

C. For the purposes of this waiver “family member” means any of the following legally competent persons: spouses; parents; children (including adopted children); brothers, sisters, and spouses of brothers and sisters; and any individual related by blood or affinity whose close association with the participant was the equivalent of a family relationship.

V. NOTE: Planned Emergency Research funded by a Department of Defense entity: If the research subject meets the definition of “experimental subject,” a waiver of the consent process is prohibited unless a waiver is obtained from the Secretary of Defense.

A. If the research participant does not meet the definition of “experimental subject”, policies and procedures allow the IRB to waive the consent process.

VI. NOTE: If the research involves accessing Student Records the research must comply with Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99): The federal regulation that protects the privacy of student education records. This regulation applies to
all schools that receive funds under an applicable program of the U.S. Department of Education. Generally, a waiver of the consent process is prohibited. The parent or eligible student must provide permission or consent in order to obtain any information from a student's education record for research purposes.

References:
45 CFR 46
45 CFR 46.116
21 CFR 50 and 56
21 CFR 50.24
OHRP Guidance Document; Emergency Research Informed Consent Requirements (OPRR 96-01)
45 CFR 46 Waiver Of Informed Consent Requirements in Certain Emergency Research (Federal Register, Vol. 61, No. 192, pp. 51531-51533, October 2, 1996)
FDA Information Sheets- Exception from Informed Consent for Studies Conducted in Emergency Settings
DoD: 10 USC 908(b)
ED: 34 CFR 99
FDA Guidance Waiver of Consent/ Minimal Risk:
FDA Guidance / In Vitro Devices:
FDA Guidance/ Children:
https://www.fda.gov/scienceresearch/specialtopics/running clinicaltrials/ucm119111.htm
Purpose:
This procedure provides guidance on obtaining a waiver of informed consent; and requesting approval for exception from informed consent in planned emergency research from the UC Irvine (UCI) Institutional Review Board (IRB).

I. Lead Researcher (LR) Responsibilities
   A. Waiver of informed consent in public benefit or service programs or for minimal risk research.
      1. The LR will assess the proposed research to determine if it meets regulatory requirements for a waiver of informed consent.
      2. The LR will complete and submit for review the “Request for Waiver or Alteration of Consent” if requesting a waiver under Option One or Option Two in Policy 32 (IRB Appendix O).
   B. Exception from informed consent requirements for planned emergency research.
      1. The LR is responsible for providing all study documents and any additional materials requested by the IRB to prepare and conduct community consultation and public disclosure of the proposed research.
      2. The LR will prepare and submit to the IRB materials in preparation for public disclosure following completion of the research.
      3. The LR will establish an independent data and safety monitoring committee to exercise oversight of the clinical investigation.
      4. When the LR is unable to locate a legally authorized representative, the LR will attempt to contact, within the therapeutic window, the participant’s family member who is not a legally authorized representative, to ask whether he or she objects to the individual’s participation. A summary of efforts to contact the legally authorized representative and family members is made available to the IRB at the time of continuing review.

II. IRB Committee Responsibilities
   A. The IRB Reviewers will consider the request for a waiver of informed consent and the LR’s justification verifying and documenting that regulatory conditions are applicable to the proposed research activity.
   B. If the IRB Reviewers agree with the LR’s justification and documentation for waiver or alternation of the consent process, they will document on the IRB Reviewer’s Supplemental Checklist that they agreed with the Investigator’s justifications.
   C. If the IRB Reviewers do not agree with the Investigator’s justification, but agree for other reasons that waiver or alteration of the consent process is allowable and appropriate, they must document on the IRB Reviewer’s Checklist, their own protocol specific findings that justify the waiver or alteration of consent.
   D. If the IRB reviewers do not agree that waiver or alteration of the consent process is allowable and appropriate, they will document such on the IRB Reviewer’s Supplemental Checklist.
   E. Exception from informed consent requirements for planned emergency research requires additional protections for the rights and welfare of the participants including, but not limited to the following:
      1. Consultation with representatives of the communities in which the investigation is conducted and from which the participants are drawn;
2. Public disclosure of plans for the investigation and its risks and expected benefits to the communities in which the research is conducted and from which the participants are drawn;

3. Public disclosure at the completion of the research to apprise the community and researchers of the study. This may include the demographic characteristics of the research population and study results.

F. When amendments are made to a currently approved research study, the waiver of informed consent is reassessed by the IRB Committee, Chairperson or his or her designee, and a determination made as to whether the conditions for the waiver have been altered, necessitating the rescinding of the waiver. If this occurs, the IRB also determines whether currently enrolled participants must be re-consented by the LR.

III. IRB Analyst or Higher Responsibilities

A. The Analyst will conduct a pre-review of the request for waiver of consent to verify that the study meets the criteria for a waiver of informed consent. If the Analyst determines that the study does not meet the criteria for a waiver, the LR may be contacted for further clarification or guidance on drafting an informed consent document.

B. E-mails recommending pre-review changes are sent to the LR by the Analyst.

C. Upon receipt of the pre-review revisions, the Analyst will provide the study and informed consent documents to the assigned reviewers (expedited or IRB Committee review).

D. Appropriate database entries are completed.