

University of California, Irvine  
Human Research Protections  
Standard Operating Policies and Procedures

---

**Policy Number: 17**

**Title: Amendments to Previously Approved or Registered Research**

**Date of Last Revision: 08/10/05; 08/23/10; 05/01/13, 06/05/13, 04/23/15, 07/21/15, 08/05/15, 03/05/16, 05/01/16, 10/1/18, 11/13/19, 04/29/20, 08/27/20, 02/23/22, 03/23/22, 09/13/22, 12/05/22**

**Policy:**

It is the policy of the UC Irvine (UCI) Institutional Review Board (IRB) to review all requests for amendments to previously approved research projects to determine if a change in the risk/benefit ratio of the study has occurred.

Research activities in which the only involvement of human subjects will be in one or more of the categories specified under 45 CFR 46.104 (d) are exempt from the requirements of the basic Health and Human Services Policy for the Protection of Human Research Subjects (Subpart A). As such, for research confirmed as exempt by the UCI IRB, minor changes may be made without prospective IRB review and approval.

In addition, for specific types of research self-confirmed via the Exempt Self Determination Tool in the electronic IRB submission and management system, changes may also be made without prospective IRB review and approval.

- I. Amendments: For previously IRB approved or IRB confirmed research all planned changes in the conduct of a study and/or changes to the informed consent document must be approved by the IRB prior to initiation. Exceptions for exempt research are noted below in Section F.
- II. In addition, the addition and removal of research personnel is no longer required to be submitted to the IRB as an amendment unless the role of the research personnel mandates accordingly. See Section G below.
  - A. The Investigator may make an amendment to research activities to avoid an immediate hazard to the participant but must report this to the IRB via the New Information reporting process, as applicable (See Policy # 19).
  - B. Investigators must submit the amendment request along with revisions to the research protocol and any proposed changes to the consent document or other documents to the IRB.
  - C. Amendments to the previously approved research must meet the regulatory criteria for approval when one or more regulatory criteria are affected.
  - D. Full Committee Review: Amendments that do not meet the criteria for expedited review must be reviewed by the Full Committee at a convened meeting. **Table 1 provides examples of types of amendments that may qualify for full committee review.** The decision to send an amendment request to the full committee is based on the impact to the risk / benefit ratio and is made with IRB Chair's discretion, based on their expertise.

- E. Expedited Review: Amendments that meet the criteria for expedited review will be reviewed by a Chair, designated IRB subcommittee, or an HRP Staff Reviewer according to the expedited review procedures. **Table 1 provides examples of types of amendments that may qualify for an expedited review process.**
- F. Exempt Protocols: Research activities in which the only involvement of human subjects will be in one or more of the categories specified under 45 CFR 46.104 (d) are exempt from the requirements of the basic Health and Human Services Policy for the Protection of Human Research Subjects (Subpart A). Minor changes may be made without prospective IRB review and approval.
1. **Examples of minor changes to exempt research: Do NOT submit an amendment to the UCI IRB when:**
    - a. Making editorial or administrative revisions to consent documents or other study documents
    - b. Adding non-sensitive questions to a survey or interview or revising current questions
    - c. Adding a new recruitment material that follows IRB guidelines
    - d. Increasing or decreasing the number of participants - unless adding a new population as noted below\*\*
    - e. Making study team/personnel changes - except a change in Lead Researcher (LR)
  2. **Examples of significant changes to exempt research: DO submit an amendment to the UCI IRB when:**
    - a. Adding a new population as follows:
      - i. A targeted recruitment of children
      - ii. A targeted recruitment of adults (age 18 or older) who may not be legally/mentally/cognitively competent to consent
      - iii. A targeted recruitment of prisoners
      - iv. A targeted recruitment of American Indian/Alaska Native tribes
      - v. A targeted recruitment of undocumented people
    - b. Adding non-UCI personnel engaged in research: a) intervening or interacting with the participants and/or b) having access to participant identifiable private information for research purposes.
    - c. Adding an international research site
    - d. Adding questions about sensitive aspects of the participants' behavior such as illegal conduct, drug use, sexual behavior or use of alcohol – to a survey or interview
    - e. For a change in study LR
    - f. To disclose a new financial interest
    - g. When adding Department of Justice (DOJ) funding
    - h. For any change that makes the study no longer eligible for Certification of Exemption (study will require expedited or full committee review)
  3. For research self-confirmed via the Exempt Self Determination Tool, changes that do not impact the level of review (such that the study no longer meets the exempt self-determination categories) may be made without prospective IRB review and approval.

- G. Research Personnel: Only list those research personnel in the IRB Application who may be involved in the following tasks. The Lead Researcher is required to maintain the Study Team log or something similar to track Research Personnel independently. Prior to engaging in human subject research, all Research Personnel must complete the applicable CITI human subject training course, including HIPAA if research involves PHI.

**Research Personnel Heat Map**

Role of Research Personnel <sup>1</sup>	Minimal Risk Protocol	Greater Than Minimal Risk Protocol
Access to subject identifiable data including Protected Health Information (PHI) for screening/ determining eligibility	<p>List only the Lead Researcher (LR) and Co-Researcher(s) in the UCI IRB Application. The LR is required to <u>maintain a Study Team log</u> or something similar to track Research Personnel independently.</p>	
Recruiting subjects directly via phone, email or in person		
Access to subject identifiable data which may include PHI for data collection purposes		
Involvement in the informed consent process (i.e., explaining the study to prospective subject)		
Performing research procedures that involve greater than minimal risk		
Involvement in the interpretation of study data	<p>List the LR, Co-Researcher(s) and Research Personnel in the UCI IRB Application.</p>	
Finalization of the informed consent process (i.e., able to sign off as the individual obtaining consent)		
Has a <u>disclosable financial conflict of interest</u>		

When using the Research Personnel Heat Map, the assumption is that Research Personnel are *engaged in human subject research* as per the [OHRP Engagement in Human Subject Research](#) document.

III. Types of Amendments

A. Minor Amendments:

1. Minor amendments may be reviewed by experienced IRB Committee Chair, designated IRB subcommittee, or an HRP Staff Reviewer.
2. Delegation is provided in the HRP Staff Reviewer Delegation of Authority document maintained on the HRP WIKI page – and signed by the IRB Chairs for A, B, C, and Vice- Chair for Team D.
3. An HRP Staff Reviewer is defined as follows:
  - a. **Tier 1:** Administrator or above, CIP certified and appointed as IRB members or alternate members. Exceptions are noted as applicable.
  - b. **Tier 2:** Analysts or above, CIP certified. Those without current CIP have been designated by an IRB Chair, Director or Assistant Director of Human Research Protections to have the appropriate experience to review minimal risk protocols. Exceptions are noted as applicable.
4. An HRP Staff Reviewer (**Tier 1** or **Tier 2**) may review amendments **except under the following conditions:**
  - a. Authority examples and exceptions are summarized below and further delineated in Table 1b.
  - b. IRB Committee Chair or Designated IRB Subcommittee Must Review:

- i. Changes that are exceptions as noted in Policies #12 and #13
  - ii. For protocols approved as involving greater than minimal risk:
  - iii. Changes involving vulnerable populations
    - 1. Changes involving FDA-regulated research activities
    - 2. Adding new procedures
    - 3. Adding a new study site
    - 4. Adding questions about *sensitive aspects of the subjects' behavior and health status (e.g., Hepatitis/HIV status, illegal behavior, abuse, alcohol/drug use, sexual behavior, or use of alcohol – to a survey or interview*
    - 5. Disclosure of a new financial interest
    - 6. Change in LR or FS or a member of the study team who holds a critical role in the study
    - 7. Addition of newly-identified risk
    - 8. Changes to consent process
    - 9. Changes to compensation plan
- 5. Examples of Acceptable Amendments to be reviewed by designated reviewers:
  - a. Adding or removing research personnel (See Policy # 17, Section II. G. above)
  - b. Fixing typographical errors or minor word changes to study documents
  - c. Revisions to or adding data collection instruments
  - d. Adding new recruitment materials
  - e. Increasing or decreasing the number of subjects
- 6. For protocols approved as involving greater than minimal risk, proposed changes:
  - a. Do not increase risk to subjects;
  - b. Constitute a minor change to previously approved research; and
  - c. Involve procedures that fall within Exempt categories 1 – 6 or Expedited categories 1 - 7.
  - d. Authority examples and exceptions are summarized in Table 1b below.

B. Major Amendments:

When a proposed change in a research study does not constitute a minor amendment, the IRB must review and approve changes at a convened meeting (See Procedure # 14.A).

- C. The IRB will determine that any significant new findings that arise from the review process that might be related to participants willingness to continue participation are provided to participants.

- D. **Special Composition Requirements for Vulnerable Populations**  
 When a study requires review by the full IRB Committee, it must meet special composition requirements (See IRB Procedures # 36.A, 37.A, 38.A, 39.A, and 40.A) when conducting reviews of amendments.

**E. Re-consent/Notification of Participants**

The IRB will render a determination of whether the changes to the research activities constitute significant new findings that might relate to participants' willingness to continue participation. The IRB will also assess how currently enrolled participants will be informed of the new findings (e.g., change in the ICDs) and, if and how participants who have completed research interventions should be notified.

**References:**

21 CFR 56.110(b)(2)

45 CFR 46.110(b)(2)

---

**Procedure Number 17.A****Title: Procedure for Amendments to Previously Approved or Registered Research****Procedure:**

This procedure provides guidance for submission, review and approval of amendments to previously approved or registered research projects.

**I. Lead Researcher (LR) Responsibilities**

- A. The LR will complete the electronic amendment application and explain the requested change along with a justification for the change. All revisions must be incorporated into any applicable, corresponding documents such as the informed consent document (ICD). Changes to the documents should be underlined or highlighted.
- B. If, in the LR's opinion, the risk/benefit ratio has changed, such that it constitutes a significant change that might affect a subject's willingness to participate, the LR should provide a revised ICD to re-consent currently enrolled participants. The IRB Committee may also request re-consenting of the participants.
- C. Except as outlined in the current Policy # 17, Section 1E, any proposed or anticipated changes in UCI confirmed exempt research must also be submitted to the IRB for approval prior to initiation of the change. The research will then be evaluated for appropriate IRB review.
- D. When the LR makes changes to avoid an immediate hazard to the participant, the LR completes an electronic New Information Report. The Investigator is required to submit the form to the IRB in accordance with IRB Policy # 19.

**II. IRB Committee Responsibilities**

- A. The IRB Chairperson, designated IRB subcommittee, or HRP staff Reviewer may review and approve research that meets the definition of a minor amendment (see Procedure # 13.A).
- B. When a proposed change in a research study represents a significant amendment, the full IRB Committee must review and approve the changes. Only one Reviewer is required for review of significant amendments. The Reviewer and Committee members will receive via access to the electronic IRB submission and management system:
  1. The Amendment,
  2. All revised documentation highlighted or underlined including the revised informed consent document, if applicable,
  3. The Sponsor Protocol, if applicable,
  4. The last approved Investigator's Brochure, if applicable,
  5. Any additional pertinent material (e.g., questionnaires, advertisements, Data Safety Monitoring Board Reports (DSMB) reports, DHHS-grant application, etc.),
  6. Regulatory resources such as the criteria for IRB approval.
- C. The IRB Committee must determine whether the regulatory criteria for approval are met when the amendment impacts one or more regulatory criteria.
- D. The IRB will determine that any significant new findings that arise from the review process and that might be related to participants' willingness to continue participation are provided to participants. When considering notification regarding significant new findings that arise from the review process, the IRB must take into account the prospective participants, participants enrolled in the study and, if applicable, participants who have completed the research.

### **III. Human Research Protections (HRP) Team Responsibilities**

- A. Conducts a pre-review to determine whether the application includes all information required and requests additional information, if needed, from the LR, to assist the Reviewer in making a determination.
- B. Determine if the amendment reflects a significant or minor change.
- C. Changes meeting the criteria for minor amendments are reviewed and approved by the IRB Chairperson, designated IRB subcommittee, or an HRP Staff Reviewer.
- D. Changes meeting the criteria for a significant amendment are prepared for full IRB Committee review, placing the study on the next available Committee agenda, and preparation of materials for the Reviewer and Committee members.
- E. Requests for information will be sent via to the LR via the electronic IRB submission and management system.
- F. When consultants to the IRB are utilized, obtain a signed Consultant's standards document which includes a description of Disclosable Conflict of Interest and a statement of confidentiality.
- G. Assembles and prepares for distribution of review materials.
- H. Draft correspondence from the Reviewer and approval letters using the appropriate template which includes a citation to the specific permissible category or categories justifying the expedited review.
- I. Amendments are processed according to corresponding IRB policies and procedures.
- J. Appropriate database entries in in the electronic IRB submission and management system are completed.
- K. Approved documents are processed.

I. Table 1a – Review of amendments submitted for expedited studies (and exempt when applicable)

Amendment Type	Reviewed by ____ (or above)	Example	Exceptions
Minor Change	HRP STAFF REVIEWER: Tier 2	Adding or removing research team personnel (See Policy # 17, Section II. G. above)	
Minor Change	HRP STAFF REVIEWER: Tier 2	Minor <b>non-administrative</b> wording changes in the approved consent form, recruitment materials, or other documents. For example, minor changes to <i>time commitment, and location</i> .	
Minor Change	HRP STAFF REVIEWER: Tier 2	Changing study documents such as surveys, questionnaires or brochures including removing questions or components of a survey/questionnaire, addition of questions or components to a survey/questionnaire that are similar in nature to existing components.	When vulnerable populations are targeted enrollees the amendment must be reviewed by the <b>Tier 1</b> or <b>IRB MEMBER</b> .
Minor Change	HRP STAFF REVIEWER: Tier 2	Adding new recruitment materials.	
Minor Change	HRP STAFF REVIEWER: Tier 2	Increasing or decreasing maximum or target sample size.	
Minor Change	HRP STAFF REVIEWER: Tier 2	Adding study sites (which may require a Federal Wide Assurance (FWA) and appropriate IRB approval) or the removal of study sites.	
Minor Change	HRP STAFF REVIEWER: Tier 2	Decreasing the number or volume of biological sample collections, provided that such a change does not affect the collection of information related to safety evaluations.	
Minor Change	HRP STAFF REVIEWER: Tier 2	New study documents to be distributed to or seen by subjects that include information or questions that are substantively different from materials already approved by the IRB.	
Minor Change	IRB MEMBER	New or revised <b>financial conflict of interest</b> management plans.	
Minor Change	IRB MEMBER	An increase in risk to subjects not previously disclosed as part of the IRB approved study materials	



Amendment Type	Reviewed by _____ (or above)	Example	Exceptions
Major Change	<b>HRP STAFF REVIEWER:</b> <b>Tier 2</b>	Changing study documents such as surveys, questionnaires or brochures including removing questions or components of a survey/questionnaire where the new questions <b>would reasonably place subjects at risk</b> of criminal or civil liability or be damaging to the subjects' financial standing, employability, insurability, reputation, or be stigmatizing if the answers became known outside of the study context.	

II. Table 1b – Review of amendments submitted for greater than minimal risk studies

Amendment Type	Reviewed by ___ (or above)	Example	Exceptions
Minor Change	HRP STAFF REVIEWER: Tier 2	Minor <b>non-administrative</b> wording changes in the approved consent form, recruitment materials, or other documents. For example, minor changes to <i>time commitment</i> .	Addition of new study sites must be reviewed by the <b>IRB MEMBER</b> .
Minor Change	HRP STAFF REVIEWER: Tier 2	Changing study documents such as surveys, questionnaires or brochures including removing questions or components of a survey/questionnaire, addition of questions or components to a survey/questionnaire that are similar in nature to existing components.	When vulnerable populations are targeted enrollees, the amendment must be reviewed by the <b>IRB MEMBER</b> .
Minor Change	HRP STAFF REVIEWER: Tier 1	Adding or removing research team personnel (See Policy # 17, Section II. G. above)	Change in LR or FS or a member of the study team who holds a critical role in the study (e.g., removal of a co-researcher who is performing a critical study assessment, etc.) must be reviewed by an <b>IRB MEMBER</b> (expedited).
Minor Change	<b>IRB MEMBER</b>	Adding new recruitment materials.	
Minor Change	<b>IRB MEMBER</b>	Increasing or decreasing maximum or target sample size.	
Minor Change	<b>IRB MEMBER</b>	Adding study sites (which may require a Federal Wide Assurance (FWA) and appropriate IRB approval) or the removal of study sites.	
Minor Change	<b>IRB MEMBER</b>	Minor changes specifically requested by the Conflict of Interest Oversight Committee (COIOC); Institutional Biosafety Committee (IBC); or other University Committees with jurisdiction over the research.	
Minor Change	<b>IRB MEMBER</b>	Changes in inclusion/exclusion criteria.	

Amendment Type	Reviewed by — (or above)	Example	Exceptions
Minor Change	IRB MEMBER	Altering the dosage form (e.g., tablet to capsule or oral liquid) of an administered drug, provided the dose and route of administration remain constant.	
Minor Change	IRB MEMBER	Decreasing the number or volume of biological sample collections, provided that such a change does not affect the collection of information related to safety evaluations.	
Minor Change	IRB MEMBER	Decreasing the length of hospitalization or number of study visits, provided that such a decrease does not affect the collection of information related to safety evaluations.	
Major Change	IRB MEMBER	<b>New</b> study documents to be distributed to or seen by subjects that include information or questions that are <b>substantively different</b> from materials already approved by the IRB.	
Major Change	IRB MEMBER	New or revised <b>financial conflict of interest</b> management plans.	
Major Change	IRB MEMBER	An <b>increase in risk to subjects not previously disclosed</b> as part of the IRB approved study materials.	
Major Change	IRB MEMBER	Changing study documents such as surveys, questionnaires or brochures including removing questions or components of a survey/questionnaire where the new questions would reasonably <b>place subjects at risk</b> of criminal or civil liability or be damaging to the subjects' financial standing, employability, insurability, reputation, or be stigmatizing if the answers became known outside of the study context.	
Major Change	IRB MEMBER	Add Relying Sites.	