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, 10/11/18, 11/13/19, 04/29/20, 08/27/20, 02/23/22,
03/23/22, 09/13/22

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 or designee according 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.

A. **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)

B. **Examples of significant changes to exempt research: DO submit an amendment to the UCI IRB when:**

a) Adding a new population as follows:
   1. A targeted recruitment of children
   2. A targeted recruitment of adults (age 18 or older) who may not be legally/mentally/cognitively competent to consent
   3. A targeted recruitment of prisoners
   4. A targeted recruitment of American Indian/Alaska Native tribes
   5. 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 disclosure 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)

C. 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**

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

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:

Minor amendments may be reviewed and confirmed by the following:

a) **IRB MEMBER**

b) **HRP STAFF REVIEWER: Tier 1** and **Tier 2**

B. 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 and C, as well as the Director, Human Research Protections. Definition of HRP Staff Reviewers is noted in Section III below.

C. Authority examples and exceptions are summarized below and further delineated in Table 1b.

D. An HRP Staff Reviewer (both tiers) may review amendments except under the following conditions:

   a) Changes that are exceptions as noted in Policies #12 and #13
   b) Any change that makes the study no longer eligible for exempt (when the amendment is applicable) or expedited review

A. For protocols approved as involving greater than minimal risk:

   c) Changes involving vulnerable populations
   d) Changes involving FDA-regulated research activities
   e) Adding new procedures
   f) Adding a new study site
g) 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.

h) Disclosure of a new financial interest.

i) Change in LR or FS or a member of the study team who holds a critical role in the study.

j) Addition of newly-identified risk.

k) Changes to consent process.

l) Changes to compensation plan.

Examples of Acceptable Amendments to be reviewed by designated reviewers:

- Adding or removing research personnel (See Policy # 17, Section II. G. above)
- Fixing typographical errors or minor word changes to study documents
- Revisions to or adding data collection instruments
- Adding new recruitment materials
- Increasing or decreasing the number of subjects

B. 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.

E. 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).

IV. IRB Reviewers and Delegation of Authority

A. IRB Reviewers:

a) **IRB MEMBER:** Chair, Vice Chair or another designated IRB member or alternate member. These are not HRPP Staff members.

b) **HRP STAFF REVIEWER:**

   (1) **Tier 1:** Administrator or above, CIP or CCRP certified and appointed as IRB members or alternate members may review transactions related to exempt and expedited level protocols. Exceptions are noted as applicable. Those without current CIP or CCRP have been designated by an IRB Chair or the Director, Human Research Protections to have the appropriate experience to review transactions related to exempt and expedited protocols.
(2) **Tier 2**: Analysts or above, CIP or CCRP certified may review transactions related to exempt and expedited level protocols. Those without current CIP or CCRP have been designated by an IRB Chair or the Director, Human Research Protections to have the appropriate experience to review transactions related to exempt and expedited protocols.

**B.** 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.

**C.** **Special Composition Requirements for Vulnerable Populations**

**D.** **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 or his/her/their designee 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. **IRB Analyst or Higher Responsibilities**

A. The Analyst will review the Amendment request and determine if it reflects a significant or minor change.

B. Changes meeting the criteria for minor amendments will be reviewed and approved by the IRB Chairperson or his/her designee.

C. Requested changes meeting the criteria for a significant amendment will be 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.

D. The Analyst will assist in obtaining any additional information requested by the Committee Chairperson or Reviewer.

E. At any time, the Analyst may consult with the IRB Committee Chairperson for assistance in determining the type of review that is required to process the amendment.

F. Letters denoting the IRB Committee determinations will be drafted using the appropriate template and based on the documentation approved by the IRB in the electronic IRB submission and management system.

G. The Analyst will process the approved documents and make the appropriate database entries.
<table>
<thead>
<tr>
<th>Amendment Type</th>
<th>To be reviewed by (or above)</th>
<th>Example</th>
<th>Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 2</td>
<td>Adding or removing research team personnel (See Policy # 17, Section II. G. above)</td>
<td>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 HRP STAFF REVIEWER: Tier 1 or an IRB MEMBER (expedited). Case by case assessment for exempt.</td>
</tr>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 2</td>
<td>Minor non-administrative wording changes in the approved consent form, recruitment materials, or other documents. For example, minor changes to time commitment, and location.</td>
<td>Addition of new study sites for expedited research must be reviewed by HRP STAFF REVIEWER: Tier 1 or an IRB MEMBER.</td>
</tr>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 2</td>
<td>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.</td>
<td>When vulnerable populations are targeted enrollees the amendment must be reviewed by the IRB MEMBER.</td>
</tr>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 2</td>
<td>Adding new recruitment materials.</td>
<td></td>
</tr>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 1</td>
<td>Increasing or decreasing maximum or target sample size.</td>
<td></td>
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<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 1</td>
<td>Adding study sites (which may require a Federal Wide Assurance (FWA) and appropriate IRB approval) or the removal of study sites.</td>
<td></td>
</tr>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 1</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 1</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>New or revised financial conflict of interest management plans.</td>
<td></td>
</tr>
<tr>
<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>An increase in risk to subjects not previously disclosed as part of the IRB approved study materials</td>
<td></td>
</tr>
<tr>
<td>Major Change</td>
<td>IRB MEMBER</td>
<td>Changing study documents such as surveys, questionnaires or brochures including removing questions or components of a survey/questionnaire where the new questions would reasonably place subjects at risk 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</td>
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</tbody>
</table>
## II. Table 1b – Review of amendments submitted for greater than minimal risk studies

<table>
<thead>
<tr>
<th>Amendment Type</th>
<th>To be reviewed by ____ (or above)</th>
<th>Example</th>
<th>Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 1 and Tier 2</td>
<td>Minor non-administrative wording changes in the approved consent form, recruitment materials, or other documents. For example, minor changes to time commitment.</td>
<td>Addition of new study sites must be reviewed by the IRB MEMBER.</td>
</tr>
<tr>
<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 1 and Tier 2</td>
<td>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.</td>
<td>When vulnerable populations are targeted enrollees, the amendment must be reviewed by the IRB MEMBER.</td>
</tr>
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<td>Minor Change</td>
<td>HRP STAFF REVIEWER: Tier 1</td>
<td>Adding or removing research team personnel (See Policy # 17, Section II. G. above)</td>
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<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>Adding new recruitment materials.</td>
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<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>Increasing or decreasing maximum or target sample size.</td>
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<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>Adding study sites (which may require a Federal Wide Assurance (FWA) and appropriate IRB approval) or the removal of study sites.</td>
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</tr>
<tr>
<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>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.</td>
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<tr>
<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>Changes in inclusion/exclusion criteria.</td>
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<tr>
<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>Minor Change</td>
<td>IRB MEMBER</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>Major Change</td>
<td>IRB MEMBER / Full Committee</td>
<td>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.</td>
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</tr>
<tr>
<td>Major Change</td>
<td>IRB MEMBER / Full Committee</td>
<td>New or revised financial conflict of interest management plans.</td>
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<tr>
<td>Major Change</td>
<td>IRB MEMBER / Full Committee</td>
<td>An increase in risk to subjects not previously disclosed as part of the IRB approved study materials.</td>
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<td>Amendment Type</td>
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<tr>
<td>Major Change</td>
<td>IRB MEMBER / Full Committee</td>
<td>Changing study documents such as surveys, questionnaires or brochures including removing questions or components of a survey/questionnaire where the new questions would reasonably place subjects at risk 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.</td>
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</tr>
<tr>
<td>Major Change</td>
<td>IRB MEMBER / Full Committee</td>
<td>Add Relying Sites.</td>
<td></td>
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