

# Institutional Review Board

Title:	Risks to Research Participants
Version:	1.00
Effective Date:	February 3, 2025
Responsible Office:	Institutional Review Office (IRO)
Responsible Official / Approved By:	Meghan Scott, IRO Director

## **POLICY STATEMENT**

It is the policy of the Fred Hutchinson Cancer Center (Fred Hutch) that human subject research studies should employ sound research principles and minimize risks associated with participation. The Institutional Review Office (IRO) Staff and the Institutional Review Board (IRB) Members will conduct a systematic evaluation of the potential risk and benefits to research participants as part of the initial review and ongoing review of the research study. In minimizing risks, the IRB should consider physical, psychological, legal, economic and social risks. The investigators of the research study should be aware of the risks associated with all study activities and procedures.

#### **DEFINITIONS**

See HRP-001 - Glossary of Terms and Acronyms for full definitions of the following:

# **Minimal Risk**

## Risk

## INDIVIDUALS AFFECTED BY THIS POLICY

The contents of this policy apply to IRO staff, IRB members, employees of Fred Hutch and investigators from other institutions who submit research studies to the Fred Hutch IRB for review and approval.

# **PROCEDURES**

#### 1. Minimizing Risk

Risks to research participants must be minimized by using procedures which are consistent with sound research design and which do not unnecessarily expose research participants to risk.

### 2. IRB Review

During the review of New Study, Continuing Review and Modification submissions, the IRB should:

- Consider physical, psychological, legal, economic and social risks.
- Analyze the levels of risk
- Ensure risks are minimized and procedures:
  - Are consistent with sound research
  - Do not expose research participants to unnecessary risk
  - Have already been performed on research participants for diagnostic or treatment purposes when appropriate.

<sup>&</sup>lt;sup>1</sup> HHS: 45 CFR 46.111(a)(1); FDA: 21 CFR 56.111(a)(1)

Ensure risks are reasonable relative to anticipated benefits<sup>2</sup>

The IRB Staff, Designated Reviewers or IRB Members will review the submissions to evaluate whether risks to research participants are minimized. The reviewers will reference the protocol, SmartForms, and IRB application forms to assist with this assessment. IRB application forms can include: HRP-250 - FORM - IRB Application (Contact), HRP-251 - FORM - IRB Application (No Contact), HRP-253 - FORM - Continuing Review Supplement, or HRP-252 - FORM - Modification Supplement

- The *HRP-442 CHECKLIST IRB Member* will be used to assist the IRB Chair and Members in identifying, evaluating and documenting the most current information about the any potential risk and benefits of the interventions involved in the research.
- The IRB Staff will use HRP-360 WORKSHEET IRB Application (Contact), HRP-361 WORKSHEET IRB Application (No Contact), HRP-362 WORKSHEET Modification, and HRP-363 WORKSHEET Continuing Review, to assist the IRB Staff to identify and document any possible risk related issues and also remind IRB Staff to identify when a consultant may be needed depending on any unique considerations for special populations noted in HRP-125 POLICY Research Involving Special Populations.

The IRB may need to obtain consultants with additional experts when aspects of the research design seem to pose a significant concern or when special populations will be included in the research.

The IRB shall consider the Data and Safety Monitoring Plan outlined in the appropriate *IRB Application* and/or protocol as well as the Data Safety Monitoring Board, when applicable, as described in the *Cancer Consortium Data and Safety Monitoring Plan*.

The IRB Staff will document the findings of the IRB and communicate those findings to the Principal Investigator (PI) and study staff as outlined in *HRP-041 - POLICY - Meeting and Meeting Records* and screeners noted above.

#### 3. The PI should:

- Be aware of the risks associated with study procedures and consider that risks to research participants are minimized by using procedures which are consistent with sound research design and which do not unnecessarily expose research participants to risk. For example:
  - Substituting less risky procedures for riskier procedures when adequate to answer the study question
  - Use of the minimal number of procedures to answer the study question
  - Enrollment of the minimum number of research participants needed to answer the study question
  - Modification of inclusion/exclusion criteria to exclude research participants who might be at increased risk if they undergo the research procedures, or include research participants who might be at less risk if they undergo the research procedures
- Complete and submit New Study, Continuing Review and Modification submissions in Hutch IRB for IRB review and include the appropriate attachments to the submission. The submission must provide a description of:
  - Potential risks to research participants
  - Frequency, severity, and reversibility
  - Planned procedures and plans to minimize, monitor, and report risk to the IRB to include the risk of confidentiality
  - Potential benefits to be gained by research participants and future research participants
  - Any potential changes in risk and benefit when revising the research study

<sup>&</sup>lt;sup>2</sup> HHS: 45 CFR 46.111(a)(2); FDA: 21 CFR 56.111(a)(2)

## SUPPORTING DOCUMENTS

HRP-001 - Glossary of Terms and Acronyms

HRP-041 - POLICY - Meeting and Meeting Records

HRP-125 - POLICY - Research Involving Special Populations

HRP-250 - FORM - IRB Application (Contact)

HRP-251 - FORM - IRB Application (No Contact)

HRP-252 - FORM - Modification Supplement

HRP-253 - FORM - Continuing Review Supplement

HRP-360 - WORKSHEET - IRB Application (Contact)

HRP-361 - WORKSHEET - IRB Application (No Contact)

HRP-362 - WORKSHEET - Modification

HRP-363 - WORKSHEET - Continuing Review

HRP-442 - CHECKLIST - IRB Member

Fred Hutch / UW Cancer Consortium Data and Safety Monitoring Plan

# **REFERENCES**

45 CFR 46.111

21 CFR 56.111

OHRP guidance on the Genetic Information Nondiscrimination Act (GINA)

## **VERSION HISTORY**

Version	Effective Date
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