

**HRPP STANDARD OPERATING PROCEDURE/POLICY APPROVAL &
IMPLEMENTATION**

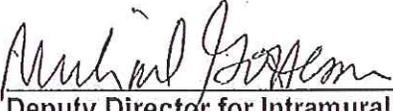
OFFICE OF HUMAN SUBJECTS RESEARCH PROTECTIONS

SOP Number: 24

SOP Title: OHSRP Reporting to the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) Regarding Unanticipated Problems, Serious or Continuing Non-compliance or Terminations or Suspensions

Distribution: Scientific Directors; Clinical Directors; Clinical Investigators; IRB Chairs, IRB Administrators, Protocol Navigators

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Deputy Director for Intramural
Research

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Implementation Approval

SOP 24. OHSRP REPORTING TO THE OFFICE FOR HUMAN RESEARCH PROTECTIONS (OHRP) AND THE FOOD AND DRUG ADMINISTRATION (FDA) REGARDING UNANTICIPATED PROBLEMS, SERIOUS OR CONTINUING NONCOMPLIANCE, OR TERMINATIONS OR SUSPENSIONS

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24.1 PURPOSE

This policy describes how NIH will comply with the reporting requirements of 45 CFR 46.103(a) and (b)(5) and, as applicable, 21 CFR 56.108(b) and 56.113. Note that adverse events and other reporting requirements originating from FDA regulations are covered in SOP 15 “Research Regulated by the Food and Drug Administration (FDA): General Procedures for Both IND and IDE Applications”

24.2 POLICY

Specified NIH officials are required to report promptly to the appropriate department or agency head: (i) any unanticipated problems involving risks to subjects or others, (ii) any serious or continuing noncompliance with the applicable DHHS and FDA human subjects regulations or the requirements or determinations of the IRB, or (iii) any suspension or termination of IRB approval.

24.3 RESPONSIBILITIES OF THE NIH OFFICE OF HUMAN SUBJECT RESEARCH PROTECTIONS (OHSRP)

- A. OHSRP receives reports about unanticipated problems, noncompliance and suspensions/terminations from IRBs in accordance with the definitions and requirements of SOP 16 “Reporting Requirements for Unanticipated Problems, Adverse Events and Protocol Deviations”, SOP 16A “Allegations of Non-compliance with Requirements of the NIH Human Research Protection Program (HRPP)”, SOP 11, “Suspensions and Terminations of IRB Approval and Administrative Holds”, SOP 15 “Research Regulated by the Food and Drug Administration (FDA): General Procedures for Both IND and IDE Applications”, 15A “Research Regulated by the Food and Drug Administration (FDA): Information and Policies Specific to Research Involving Investigational New Drugs (Including Biological Products)” and 15B “Research Regulated by the Food and Drug Administration (FDA):

Information and Policies for Investigational Device Exemption (IDE) Applications”.

- B. OHSRP is responsible for determining:
 - 1. Whether further reporting is necessary; if so
 - 2. Submitting a report to OHRP if the study is subject to DHHS regulations, and to the FDA, if the study is subject to FDA regulations.
- C. If the study is also conducted, or supported by, or subject to the regulations of a federal agency that adheres to the Common Rule, other than DHHS or the FDA, the report should also be sent to that agency, as required.
- D. The relevant IRB Chair may have the opportunity to review the report before submission to OHRP and, if applicable, the FDA.

24.3.1 REQUIRED INFORMATION FOR OHRP AND THE FDA IN THE REPORT

The report shall include the following information:

- A. For unanticipated problems: Name of the Institute/Center conducting the research, title and number of the protocol, the name of the protocol’s Principal Investigator and
 - 1. A detailed description of the unanticipated problem (UP),
 - 2. The IRB’s determination that a UP exists, and
 - 3. IRB action or plans to address the problem (e.g., revise the protocol, suspend subject enrollment, terminate the research, revise the informed consent document, inform enrolled subjects, increase monitoring of subjects, etc.).
- B. For serious or continuing noncompliance: Name of the Institute/Center conducting the research, title and number of the protocol, the name of the protocol’s Principal Investigator and

1. A detailed description of the noncompliance, including an explanation of its impact on the study and/or study participants,
 2. IRB actions or plans to address the noncompliance (e.g., educate the investigator, educate all research staff, suspend the protocol, suspend the investigator, conduct random audits of the investigator or all investigators, etc.).
- C. For suspensions or terminations: Name of the Institute/Center conducting the research, the title and number of the protocol, the name of the protocol's Principal Investigator and
1. A detailed description of the reason for the suspension or termination, and
 2. IRB actions or plans to address the suspension or termination (e.g., provide information to subjects, plans for continuing treatment of subjects, investigate alleged noncompliance, educate the investigator, educate all research staff, require monitoring of the investigator of the research project, etc.).

24.3.2 ADDITIONAL INFORMATION REQUIRED FOR REPORTS TO THE FDA

When reporting to the FDA, IND or IDE numbers, if applicable, must be included, and routed as follows:

- A. For Drug Products, to the Division of Scientific Investigations, Office of Compliance, Center for Drug Evaluation and Research.
- B. For Biologic Products, to the Bioresearch Monitoring Branch, Division of Inspections and Surveillance, Office of Compliance and Biologics Quality.
- C. For Medical Devices, to the Center for Devices and Radiological Health.

Please SOP 15 "Research Regulated by the Food and Drug Administration (FDA): General Procedures for Both IND and IDE Applications" for more information on FDA regulations.

24.4 TIME FRAME FOR REPORTING TO OHRP AND THE FDA

For unanticipated problems, serious or continuing non-compliance and/or terminations or suspensions, reports will be sent to OHRP and the FDA (as applicable) as soon as possible. The maximum time allowed between OHSRP receiving a report of an event from an IRB and submitting a report to the OHRP, or the FDA, is no more than 30 days. It may be appropriate, if allowed by law, to send an initial report to OHRP, and indicate that a follow-up or final report will follow at a specific date or when an investigation has been completed or a corrective action plan has been implemented.

24.5 OHSRP RETENTION OF COMMUNICATIONS WITH OHRP, FDA AND OTHER REGULATORY AGENCIES

Copies of formal written communications with OHRP, FDA and other regulatory agencies about unanticipated problems, serious or continuing noncompliance and terminations or suspensions must be supplied to OHSRP, and will be retained in OHSRP according to the requirements of SOP 4 “Human Research Protection Program (HRPP) Documentation and Records”.

REFERENCES

45 CFR 46: <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>

21 CFR 56:

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?CFRPart=56>