

Modifications to Previously Approved or Exempt Research Procedure

Scope

Applies to Mayo Clinic Human Research Protection Program when involved in Human Subjects. Research for which Mayo Clinic Institutional Review Board (IRB) is the IRB of Record.

Purpose

To describe the process and requirements for Investigators to use when modifications are made to the IRB approved research activity.

Equipment/Supplies

N/A

Procedure

- Modification of a research activity, during the period for which IRB approval has already been granted, must be submitted to the IRB, and approved prior to initiation of the modification(s).
- Modifications must be submitted to the IRB within the following timelines. Refer to guidance: [Reporting Timelines for IRB submission when Mayo Clinic is serving as the IRB of Record](#).
 - Changes necessary to eliminate apparent immediate hazards to the human subject may be initiated without prior IRB approval, and must be reported to the IRB within 5 working days.
 - Changes involving [Significant New Information](#) must be reported to the IRB within 5 working days.
 - All revised Investigator Brochures that do not meet the 5-day reporting requirement must be submitted within 30 calendar days.
 - Changes involving an increase in risk (newly identified or increase in severity) that does not meet the 5-day reporting requirement must be submitted within 30 calendar days.
 - Changes not involving risk or changes due to risks that have previously been reported to the Mayo Clinic IRB must be submitted within 60 calendar days.
 - Modifications not meeting the submission timeline must include a justification.
- Any modification to an exempt research project must be submitted to the IRB for review and re-determination of exemption status prior to initiating the changes to the research. In some circumstances, modifications to exempt research disqualify the research from the exempt status.
- Modifications to applications previously approved by a convened IRB may be reviewed using the expedited review process if the IRB finds:
 - The revision(s) do not pose an increased risk to subjects; and
 - The revision(s) constitute a minor change to previously approved research; and
 - Any added research activity falls within categories 1-7 of the Health and Human Services expedited review categories ([45 CFR 46.110 - Categories of Research That May Be](#)

[Reviewed by the Institutional Review Board \[IRB\] through an Expedited Review Procedure](#)).

- Modifications to applications previously approved by the expedited review process may be reviewed via expedited review if the IRB finds:
 - The research continues to pose no more than minimal risk to subjects.
 - Any added research activity falls within categories 1-7 of the HHS expedited review categories ([45 CFR 46.110 - Categories of Research That May Be Reviewed by the Institutional Review Board \[IRB\] through an Expedited Review Procedure](#)).

Investigator Responsibilities

- Promptly (**within 5 working days**) report to the IRB, using the IRB electronic (IRBe) Modification form, any research activity modifications which were made in order to avoid apparent immediate hazards to a subject and were implemented prior to IRB approval. The Modification will be titled 'Urgent Action' and include the Subject Notification form attachment.
- Promptly (**within 5 working days**) report to the IRB any [Significant New Information](#) requiring urgent action using the IRBe Modification form. The Modification will be titled 'Urgent Action' and include the Subject Notification form attachment.
- Evaluate each proposed modification to the research activity to assess potential impact upon the risk/benefit ratio, severity or frequency of the previously described risk(s), safety, design, or execution of the research project.
- Revise research project documents accordingly. Describe each proposed modification and the justification for the change in the IRBe Modification form.
- Submit an IRBe Modification form (within the timelines listed above) to the IRB and attaches a revised protocol, consent form (if applicable), and other documents associated with the requested change. A Subject Notification Form is attached in all modifications involving an increase or significant change in risk.
- Re-consent or notify subjects as directed by the IRB.
- Assure that any change to conflict of interest has been disclosed and reviewed by the Conflict of Interest Committee.

IRB Responsibilities

The IRB:

- Determine the level of review (expedited or convened IRB) required for the proposed modification(s).
- Review the proposed modification(s) in accordance with approval criteria and determine whether modifications(s) are consistent with ensuring the subject's continued protection.
- Review modifications initiated without prior IRB approval that eliminate apparent immediate hazards to the human subjects, and determine whether each change was consistent with ensuring the participant's continued welfare.
- Determine that any new significant findings arising from the review process, and possibly impacting the subject's willingness to continue participation are provided to the subject.
- Determine if any new information resulting from the modification or from other sources necessitates an adjustment to the IRB's prior determination(s), such as inclusion of protected or vulnerable populations and findings regarding FDA-regulated products.
- Determine if the proposed modifications to the research require revision of the consent document(s). If so, the IRB will ensure that revised consent documents accurately reflect the modifications.
- Determine if the modifications warrant re-consenting or notification of subjects including those who have completed research interventions.

- Consider whether the interval for continuing review as last determined by the IRB should be adjusted based on the modifications.
- Determine whether the modifications to the research activity may require verification from sources other than the investigator that no material changes have occurred. See *Verification of No Material Changes Since Previous IRB Review*.
- Notify the Principal Investigator of IRB findings and determinations.

Troubleshooting

N/A

Procedural Notes

N/A

Related Documents

[Expedited Review of Human Subjects Research](#)

[Exempt Human Subjects Research](#)

[Verification of No Material Changes since Previous IRB Review](#)

[Reporting Timelines for IRB Submission when Mayo Clinic is Serving as the IRB of Record](#)

[Subject Notification Form](#)

Definitions

Significant New Information: Information that indicates a significant new serious risk or increased severity of known risk, or a safety issue which requires immediate action.

References

[45 CFR 46.110 - Categories of Research That May Be Reviewed by the Institutional Review Board \[IRB\] through an Expedited Review Procedure](#)

[21 CFR 56.110 - Expedited review procedures for certain kinds of research involving no more than minimal risk, and for minor changes in approved research](#)

Owner

[Tammy S. Neseth, M.A.](#) on behalf of Office for Human Research Protection

Contact

[Michelle K. Daiss](#) and [Heidi M. Hanf](#)

Revision History

| Date | Synopsis of Change |
|------------|--|
| 06/04/2021 | Scheduled review. Updated to current template. Updated Owner and Contact. Minor changes. |
| 06/01/2018 | Updated to new template. IRB submission timelines added. Minor changes for clarification. Removed examples of major/minor modifications to be consistent with Reportable Event policy. |
| 02/17/2016 | Scheduled review – no changes |
| Unknown | Approval for need to establish document: Unknown |

Content Information

Notification Recipient: Kuntz, Melissa M.
Content ID: DOCMAN-0000047810
Effective Date of Current Version: 06/24/2021
Site(s): Rochester, Arizona, Florida

Workflow Reviewer Name(s): Daiss, Michelle K.; Heidi M. Hanf; Shanthi L. Siva Shanmuga Sundaram, M.A., M.Phil
Workflow Approver Name(s): Tammy S. Neseth, M.A.
Scheduled Review Due Date: 06/07/2024

COPYRIGHT © Mayo Foundation for Medical Education and Research. This information is intended for use by employees of Mayo Clinic and its subsidiaries only. It is confidential and no part of it may be transmitted in any form by electronic, mechanical, photocopying, or any other means to anyone outside Mayo Clinic without the prior permission of Mayo Foundation for Medical Education and Research. Inappropriate use or dissemination of this information may result in disciplinary action.

Master copies are retained online. Printed copies are considered current only on the date printed.