Exception from Informed Consent in Emergency Research Procedure

Scope

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

Purpose

To outline the additional requirements for conducting planned research in an emergency setting where obtaining consent may not be feasible.

Equipment/Supplies

N/A

Procedure

The IRB may approve research in an emergency setting without requiring that informed consent of research subjects be obtained if the IRB (with the concurrence of a licensed physician who is an IRB member or a consultant to the IRB and who is not otherwise participating in the research project) finds and documents that:

1. The human subjects are in a life-threatening situation necessitating urgent intervention.
2. Available treatments are unproven or unsatisfactory.
3. Collection of valid scientific evidence, which may include evidence obtained through randomized placebo-controlled investigations, is necessary to determine the safety and effectiveness of particular interventions.
4. Obtaining informed consent is not feasible because:
   a. The subjects will not be able to give their informed consent as a result of their medical condition.
   b. The intervention under investigation must be administered before consent from the subjects’ Legally Authorized Representative (LAR) is feasible; and
   c. There is no reasonable way to identify prospectively the individuals likely to become eligible for participation in the research.
5. Participation in the research holds out the prospect of direct benefit to the subjects because:
   a. Subjects are facing a life-threatening situation that necessitates intervention
   b. Appropriate animal and other preclinical studies have been conducted, and the information derived from those studies and related evidence support the potential for the intervention to provide a direct benefit to the individual subjects; and
   c. Risks associated with the investigation are reasonable in relation to what is known about the medical condition of the potential class of subjects, the risks and benefits of standard therapy, if any, and what is known about the risks and benefits of the proposed intervention or activity.
6. The research could not practicably be carried out without the waiver.
7. For investigational products, the investigator/sponsor must obtain a Food and Drug Administration (FDA) Investigational New Drug application (IND) or an FDA Investigational Device Exemption (IDE) that clearly identifies that the protocol may include subjects who are unable to provide consent.
   a. If an IND or IDE already exists, protocols involving waiver of consent requirements must be conducted under a separate IND or IDE that clearly identifies such studies as research projects that may include subjects who are unable to consent (21 CFR §50.24 Exception from informed consent requirements for emergency research.).
   b. Studies involving a waiver of consent requirement may proceed only after a sponsor has submitted an IND or IDE and received prior written authorization from the FDA and IRB approval.
8. An exception from consent in emergency medicine research is prohibited for any Department of Defense sponsored research unless a waiver is obtained from the Secretary of Defense.

Investigator Responsibilities

1. The proposed investigational plan must define the length of the potential Therapeutic Window based on scientific evidence, and the investigator must commit to attempting to contact an LAR for each subject within that window of time and, if feasible, to ask the LAR contacted for consent within that window rather than proceeding without consent.
   a. The Investigator must summarize efforts made to contact an LAR and make this information available to the IRB at the time of continuing review.
2. The IRB research project application must describe additional protections of the rights and welfare of the subjects including at least:
   a. The charter and membership of an independent Data Safety Monitoring Board (DSMB), to exercise oversight of the research.
   b. A plan for consultation (including, where appropriate, consultation carried out by the IRB) with representatives of the communities in which the investigation is to be conducted and from which the subjects will be drawn.
   c. A plan for Public Disclosure prior to initiation of the research to the communities in which the research will be conducted and from which the subjects will be drawn. The disclosure must include plans for the investigation and its risks and expected benefits.
   d. The Public Disclosure will have or has taken place prior to initiation of the investigation.
   e. Explanation of any opt-out mechanisms for potential participants.
   f. Procedures to inform, at the earliest feasible opportunity, each subject, or if the subject remains incapacitated, an LAR or a Family Member of the subject's inclusion in the clinical investigation, the details of the investigation, other information contained in the consent document, and that the subject's participation may be discontinued at any time without penalty or loss of benefits.
      i. If an LAR or Family Member is told about the research and the subject's condition improves, the subject must be informed of the research as soon as feasible
      ii. If a subject is entered into a research study with waived consent and the subject dies before an LAR or Family Member can be contacted, information about the research is to be provided to the subject's LAR or Family Member, if feasible
   g. A plan for Public Disclosure of sufficient information following completion of the research to apprise the community and researchers of the study, including the demographic characteristics of the research population, and its results.
3. If obtaining informed consent is not feasible within the Therapeutic Window and a LAR is not reasonably available, the investigator must contact, if feasible, the subject’s Family Member who is not an LAR and ask whether he or she objects to the subject's participation in the research.
The Investigator must summarize efforts made to contact Family Member and make this information available to the IRB at the time of continuing review.

4. Prior to beginning the study, ensure that all individuals, including first responders, who will carry out study-related tasks are informed of their obligations and associated regulatory requirements for conducting the research.

**IRB Responsibilities**

1. Review and approve the proposed investigational plan as provided in the Investigator's Responsibilities #1.
2. Review and approve the informed consent procedure and a consent document. These procedures and the consent document are to be used with subjects or their LAR in situations where use of such procedures and documents is feasible.
3. Review and approve procedures and information to be used when providing an opportunity for a Family Member to object to a subject's participation in the research.
4. Review and approve the additional protections of the rights and welfare of the subjects as provided in the Investigator's Responsibilities #2.
5. Review plans for Community Consultation and Public Disclosure. In reviewing Community Consultation activities, exercise judgment in determining whether these activities are adequately designed to reach the broader communities identified in the research plan. (The FDA encourages IRB members to attend Community Consultation activities in order to hear the perspectives and concerns of the communities.)
6. Consider concerns and objections to the research raised during Community Consultation activities prior to making a determination about the research.
7. Find and document that the Public Disclosure will have or has taken place prior to initiation of the research.
8. For research subject to FDA regulations:
   a. Find and document whether the investigation satisfies the criteria in 21 CFR §50.24 Exception from informed consent requirements for emergency research with the concurrence of a licensed physician who is a member of or consultant to the IRB and who is not otherwise participating in the research.
   b. If a determination is made that the IRB cannot approve the research because the investigation does not meet the emergency research criteria or because of other ethical concerns, document the findings and provide these findings promptly (within 30 days) in writing to the investigator and to the sponsor of the research.
   c. The sponsor of the research project must promptly disclose this information to FDA and to the sponsor's investigators who are participating or are asked to participate in this or a substantially equivalent research of the sponsor and to other IRBs that have been, or are, asked to review this or a substantially equivalent investigation by that sponsor.
   d. Retain the records related to these studies for at least 3 years after completion of the research and make them accessible for inspection by the FDA.
9. For research not subject to FDA regulations:
   a. Document the finding that the research is not subject to regulations codified by the FDA at 21 CFR 56-Institutional Review Boards.
   b. Document and report to Department of Health and Human Services (DHHS), its finding that the conditions of this policy have been met.

**Troubleshooting**

N/A

**Procedural Notes**
Related Documents

Selecting a Legally Authorized Representative

Definitions

**Emergency Research:** Planned research involving human subjects who have a life-threatening medical condition that necessitates urgent intervention (for which available treatments are unproven or unsatisfactory), and who, because of their condition (such as traumatic brain injury) cannot provide informed consent.

**Legally Authorized Representative (LAR):** An individual or judicial or other body authorized under applicable law to consent on behalf of a prospective subject to the subject's participation in the procedures involved in the research.

**Family Member:** Any one of the following legally competent persons: spouses; parents; children (including adopted children); brothers, sisters, and spouses of brothers and sisters; and any individual related by blood or affinity whose close association with the participant is the equivalent of a family relationship.

**Prospect for Direct Benefit:** The information from animal and preclinical studies, other clinical data (e.g., use of the product in another setting or for another diagnosis or in a different study population) or other evidence should support the potential for the investigational product to provide a direct benefit to the individual subjects.

**Therapeutic Window:** The time after onset of the event, based on available scientific evidence, within which the investigational product must be used or administered to have its potential clinical effect (diagnostic or therapeutic).

**Community Consultation:** Providing the opportunity for discussions with, and soliciting opinions from, the community in which the study will take place and the community from which the study subjects will be drawn. These communities may not always be the same; when they are not the same, both communities should be consulted.

**Public Disclosure:** Dissemination of information (i.e., one-way communication) to the community (ies), the public, and researchers about the emergency research.

References

- 45 CFR 46 Protection of Human Subjects
- 21 CFR §50.24 Exception from informed consent requirements for emergency research
- 21 CFR 56-Institutional Review Boards
- 21 CFR 812.30 - Investigational Device Exemptions
- 21 CFR 312 Investigational New Drug Application
Owner

Tammy S. Neseth, M.A. on behalf of Office for Human Research Protection

Contact

Michelle K. Daiss, and Heidi M. Hanf

Revision History

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<thead>
<tr>
<th>Date</th>
<th>Synopsis of Change</th>
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<tbody>
<tr>
<td>06/04/2021</td>
<td>Scheduled review. Updated to standardized template. Updated title to reflect regulations. Minor revisions.</td>
</tr>
<tr>
<td>08/29/2017</td>
<td>Minor revision. Updated the following definitions per Glossary review: Emergency Research, and Legally Authorized Representative.</td>
</tr>
<tr>
<td>02/16/2017</td>
<td>Scheduled review. No changes made.</td>
</tr>
<tr>
<td>03/25/2016</td>
<td>Changed Keywords heading to Key Terms heading.</td>
</tr>
<tr>
<td>Unknown</td>
<td>Approval for need to establish document:</td>
</tr>
</tbody>
</table>

Content Information

Notification Recipient: Kuntz, Melissa M.
Content ID: DOCMAN-0000047841
Effective Date of Current Version: 06/24/2021
Site(s): Arizona, Florida, Rochester, Barron, Bloomer, Eau Claire, Menomonie, Osseo, Albert Lea, Austin, Cannon Falls, Faribault, Lake City, Owatonna, Red Wing, Fairmont, Mankato, New Prague, St. James, Waseca, La Crosse, Sparta

Workflow Reviewer Name(s): Daiss, Michelle K.; Heidi M. Hanf; Shanthi L. Siva Shanmuga Sundaram, M.A., M.Phil
Workflow Approver Name(s): Neseth, Tammy S.
Scheduled Review Due Date: 06/08/2024

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