

Reporting to the Institutional Official and Regulatory Agencies Procedure

Scope

Applies to personnel within the Mayo Clinic Human Research Protection Program (HRPP) when reporting problems and events to the Institutional Official and regulatory agencies about research for which Mayo Clinic Institutional Review Board (IRB) is the IRB of Record.

Purpose

To describe the IRB's requirements for reporting problems or events to the Institutional Official and/or to appropriate regulatory agencies and the allotted timeframe of fulfilling the reporting requirements.

Equipment/Supplies

N/A

Procedure

IRB Medical Director or IRB Administrator (or their designees) responsibilities include:

1. Drafting the notification letter, that includes a description of the problem or event, determination(s) of the IRB, actions taken by the IRB, corrective action plan(s) or modifications to the research, the name of the institution conducting the research, and the name of the Principal Investigator named on the research project. Refer [Preparing and Sending Notification Letters](#).
2. Sending a copy of the notification letter to the following, as applicable:
 - a. Principal Investigator (PI)
 - b. Institutional Official
 - c. OHRP and the corresponding Department of Health and Human Services (DHHS) agency when the human research is supported by the DHHS
 - d. Food and Drug Administration (FDA) when the clinical investigation is subject to FDA regulations
 - e. Department of Defense (DoD) Human Research Protection Officer
 - f. Appropriate officials at external sites where the research is conducted when Mayo Clinic IRB is the IRB of Record
 - g. At the discretion of the IRB Medical Director or pursuant to a determination of the IRB, to other appropriate Mayo department chairperson(s) or others, **including other institutions and/or regulatory agencies**
 - h. For determinations of serious and/or continuing non-compliance, a copy of the notification letter should be sent to the following Mayo Clinic officials:
 - i. Department Chair of the PI
 - ii. Research Compliance Officer, Rochester, MN

- iii. Chair of Personnel Committee at the respective location
 - iv. Dean of Research at the respective location
 - v. Administrator(s), Office for Human Research Protection Office
3. Documentation of notification letters are uploaded in the IRB electronic study file and are also maintained in the IRB Administrative Office files.
 4. Department of Defense (DoD) Supported Research:
 - a. Determinations of serious or continuing non-compliance, unanticipated problems involving risk to subjects or others, or suspension or termination of DoD supported research must be reported within 30 days to the DoD Human Research Protection Officer.

Troubleshooting

N/A

Procedural Notes

- Federal Regulations require the IRB to promptly report the following determinations to applicable regulatory agencies, including Office of Human Research Protections (OHRP), Food and Drug Administration (FDA), Department of Defense (DoD), and the Mayo Clinic Institutional Official:
 - Unanticipated Problems Involving Risk to Subjects or Others (UPIRTSO)
 - Serious or continuing non-compliance with Federal regulations, IRB polices, or with determinations of the IRB
 - Suspensions or terminations of IRB approval
- The IRB Medical Director or IRB Administrator will notify the Institutional Official and applicable regulatory agencies, in writing, **within 30 days of the IRB's determination.**

Related Documents

[Preparing and Sending Notification Letters](#)

[Suspension or Termination of IRB Approval of Research](#)

[Submitting a Reportable Event to the IRB](#)

[Submitting a Reportable Event when Mayo Clinic IRB is not the IRB of Record](#)

Definitions

N/A

References

[Association for the Accreditation of Human Research Protection Programs \(AAHRPP\)](#)

[45 CFR Part 46 Protection of Human Subjects](#)

[21 CFR 50 Protection of Human Subjects](#)

Owner

Contact

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

Revision History

Date	Synopsis of Change
04/28/2021	Scheduled review. Transferred to the standardized template. Updated Owner and Contact, and minor edits.
09/27/ 2016	Scheduled review. No changes.
03/032016	Under Related Documents: Fixed broken link for Preparing and Sending Notification Letters.
	Approval for need to establish document: Unknown

Content Information

Notification Recipient: Kuntz, Melissa M.
Content ID: DOCMAN-0000047862
Effective Date of Current Version: 05/06/2021
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.; Shanthi L. Siva Shanmuga Sundaram, M.A., M.Phil
Workflow Approver Name(s): Neseth, Tammy S.
Scheduled Review Due Date: 04/28/2024

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.