

Guidance for Reporting Research Events and Noncompliance

The NIH IRP has revised its policies on reporting research events and non-compliance in human subjects research. Investigators are expected to be familiar with and comply fully with the reporting requirements as specified in [Policy 801 Reporting Research Events](#) and with the requirements specified [Policy 802 Non-compliance in Human Subjects Research](#).

This guidance document is intended to provide additional information that may be helpful to the investigator in interpreting these policy documents. However, this guidance does not supersede any requirements specified in the policies.

Important Changes from prior NIH SOP 16:

1. Investigators will no longer decide as to whether any reportable event is serious or non-serious. This determination will only be made by the IRB.
2. Investigators should consider whether a protocol deviation is minor or major. Only major protocol deviations need to be reported in an expedited manner.
 - a. The distinction between minor and major IS NOT the same as serious and non-serious (see details below).
3. All reportable events, except for deaths, must be reported within 7 calendar days.
4. Deaths that are at least possibly related to research must be reported within 24 hours.
5. Reporting at the time of continuing review should consist of a summary description of all deviations as well as whether AEs and SAEs were as expected. The summary may be narrative in format or a summary table. However, the investigator should not provide a line-item listing of all events.
6. The PROTECT electronic IRB (eIRB) system utilizes Reportable New Information Forms (RNIs) for submission of major protocol deviation as well as the other types of event that require expedited reporting per [Policy 801 Reporting Research Events](#) (e.g., noncompliance that is not a protocol deviation, unanticipated problems, and new information that might affect the willingness of a subject to enroll or remain in the study).

Deviations in approved research – what should be reported to the NIH IRB, when and how?

Protocol Deviation (PD) - Any change, divergence, or departure from the IRB-approved research protocol.

Major Deviations - Deviations from the IRB approved protocol that have, or may have the potential to, negatively impact, the rights, welfare, or safety of the subject, or to substantially negatively impact the scientific integrity or validity of the study.

Minor Deviations - Deviations that do not have the potential to negatively impact the rights, safety, or welfare of subjects or others, or the scientific integrity or validity of the study.

Report What and When?

Major deviations: A major deviation must be reported within 7 calendar days of an investigator becoming aware of an actual or suspected deviation.

Major deviations resulting in death must be reported within 24 hours of the occurrence of the

event or of any member of the study team becoming aware of the death. Major deviations should be submitted using the Reportable New Information (RNI) Form in the NIH electronic IRB system.

Minor Deviations: Researchers are responsible for monitoring their studies throughout the year for adherence to the IRB approved protocol. The purpose of this monitoring is to identify major deviations and to look for trends in minor deviations that may indicate a systemic issue in how the study is being conducted that could potentially negatively impact the rights, safety, or welfare of participants or the study's ability to produce scientifically valid results.

A series of minor deviations pointing toward a more global issue that could affect the rights, safety or welfare of the participant or affect the validity of the study should be reported as a major deviation. In all other instances, a summary of minor deviations should be provided to the IRB at the time of continuing review. The summary should be included in the continuing review application as part of the description of the overall study progress. Do not submit a document that simply lists all of the deviations that occurred during the conduct of the study.

An example of an appropriate summary is as follows: "There were a total of 10 deviations that have occurred which included 8 out of window visits due to inclement weather or scheduling issues with the participants and 2 participants failed to bring their medication diary to a follow up visit. There were no systemic issues identified with these deviations."

Examples

The following examples are intended to be a guide to investigators and study team personnel. These lists are not all-inclusive.

- **Major Deviations**
 - Failing to obtain legally effective consent prior to initiating research procedures. This includes failure to obtain signed consent when required.
 - Medication errors, such as administering the wrong study drug to a participant or the wrong dose of the right study drug.
 - Failing to conduct a study procedure or administer a study assessment that was meant to assess the safety of the individual's continuation in the study.
 - Failure to report protocol changes that were necessary to eliminate apparent immediate hazards to a participant or others within 7 working days as required by Policy 502, *Types of IRB Submissions*
 - Informed consent obtained by someone other than individuals authorized by the IRB to obtain informed consent.
 - Enrollment of a participant who did not meet all inclusion/exclusion criteria.
 - Performing a study procedure that has not been approved by the IRB.
 - Failure to report an Unanticipated Problem to IRB and/or sponsor of the study.
 - Study visit conducted outside the required timeframe that, in the opinion of the investigator, may impact the safety of the participant.
 - Failure to follow the IRB-approved safety monitoring plan.
 - Implementation of recruitment procedures that have not been IRB-approved.

Minor Deviations

- Receiving completed questionnaires back from participants where items are missing.
- Completing a study visit outside of the required timeframe when, in the opinion of the investigator, there are no safety implications.
- Use of an expired consent form in which the information contained is not substantively different than the currently approved consent unless the deviation occurs repeatedly.
- Minimal over-enrollment
- A signed copy of the consent form was not given to the participant.
- Documentation deficiencies in the consent form such as:
 - A missing investigator signature.
 - The participant signs the consent form but does not print their name in the signature block. *Note: A participant that does not sign and date the consent form prior to the initiation of research is considered a major deviation.*

Points to remember

It is the responsibility of the Principal Investigator to determine whether a deviation is major or minor and to ensure proper reporting. When making the determination of whether the unapproved deviation is major or minor, the Principal Investigator should consider whether the deviation negatively affected any of the following:

- The rights, safety, or welfare of the subject
- The scientific validity of the study (the ability to draw conclusions from the study data)

Please be aware that outside of the IRB reporting requirements, you may be subject to other reporting requirements with the sponsor or FDA.

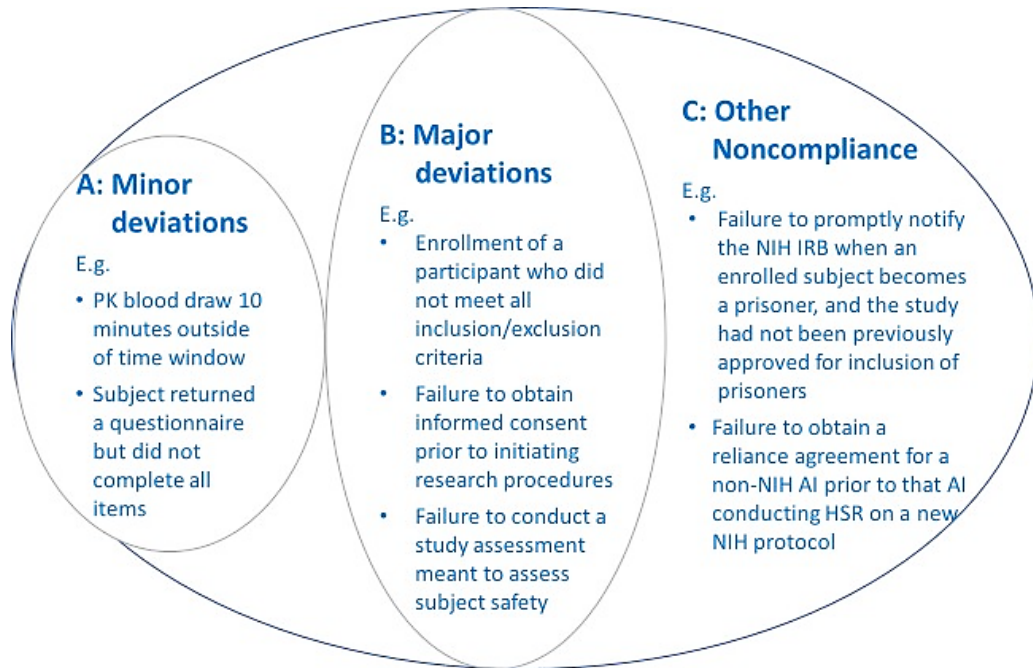
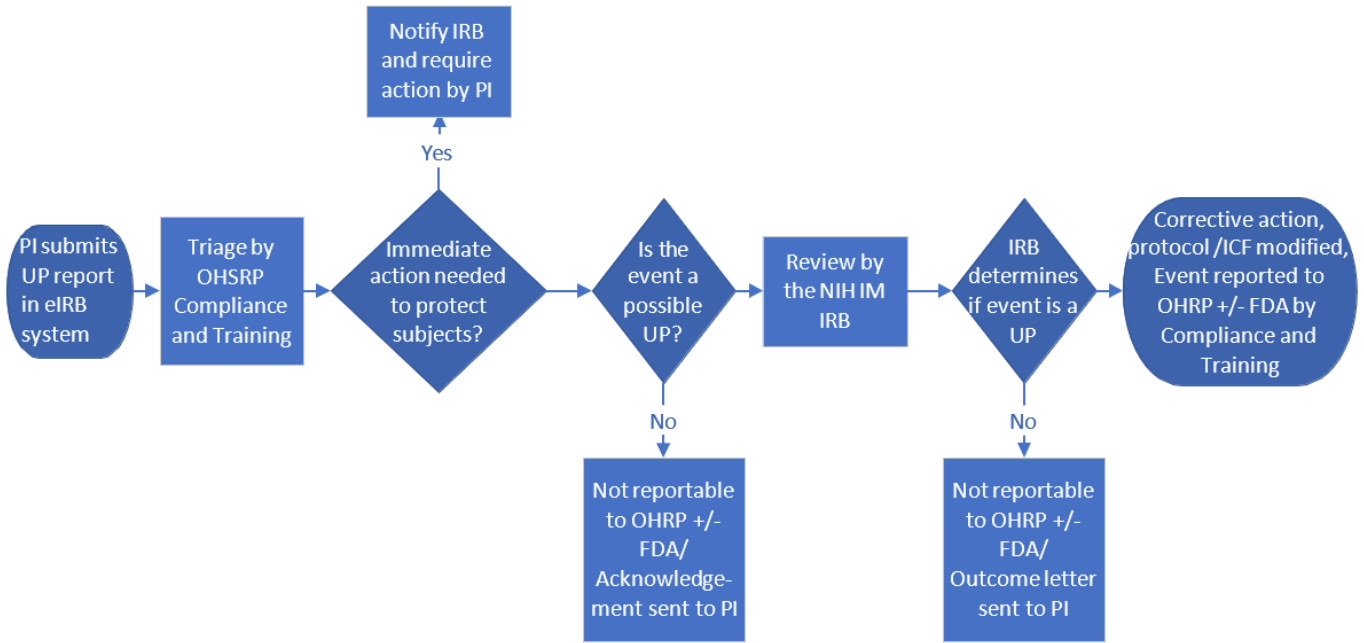


Diagram of relationships of non-Compliance and protocol deviations:

Noncompliance consists of all events in circles A + B + C. Only events that are in circles B or C need to be reported in an expedited time frame.

Flow chart for how possible unanticipated problems will be handled.



Flow chart for how events that constitute possible noncompliance will be handled

