**Human Subjects Research Adverse Events**

1. **GENERAL OVERVIEW**

The safety and well-being of human research subjects is a shared responsibility that involves investigators, the Institutional Review Boards (IRB), Office of Research Compliance (ORC), supporting units, and the university. Federal regulations require Institutional Review Boards to maintain procedures for managing unanticipated events that involve risk to subjects. This document establishes the IRB’s policy on the investigation and investigation outcome of potential adverse events.

All reports are subject to applicable law and administrative rules and regulations. Disclosure of the identity of the respondent and complainants in non-compliance investigation proceedings is limited, to the extent possible, to those who need to know, consistent with a thorough, competent, objective and fair investigation as allowed by law and regulation. Subject to applicable law, confidentiality shall be maintained for any records or evidence from which research subjects might be identified.

Changes in approved research are permitted without IRB review and approval to eliminate apparent, immediate hazards to the subjects. Any such changes must be promptly reported to the IRB.

Non-compliant events are different from adverse events; refer to the Human Subjects Research Non-Compliance Policy for more information.

1. **DEFINITIONS**

**Adverse events:** any undesirable and unintended effect, whether anticipated or not, experienced by a research subject occurring as a result of participating in a research project. Adverse events may be anticipated or unanticipated, be related or unrelated to the research, occur at a frequency greater than expected, and/or be serious in nature. Examples of adverse events include:

* Breaches in confidentiality (including loss of or infiltration of identifiable data)
* Physical, social, psychological, financial (employability), or legal harms
* Subject complaints indicating an undesirable or unintended effect
* Investigator findings indicating an undesirable or unintended effect
* Subject complaints that cannot be resolved by investigators
* Any finding that increases overall risk profile
* An unexpected risk or discomfort that has not been previously observed

**Anticipated:** any adverse event that is previously identified in the IRB approved protocol and not occurring at a rate higher than expected.

**Noncompliance:** is failure to comply with applicable policies, laws, regulations, protocols, or IRB requirements. Noncompliance may be intentional or unintentional and may not result in action. Noncompliance may be non-serious or serious.

**Related:** associated with or having a timely relationship with, as in a reasonable possibility exists that an outcome may have been caused or influenced by the research, even if an alternative explanation is present.

**Serious adverse event:** an event that results is fatal or life threatening, permanently disabling, requires prolonged hospitalization, or results in a significant disability or anomaly.

**Unanticipated problem involving risks to subjects or others:** The Office of Human Research Protections considers unanticipated problems, in general, to include those events that:(1) Are not expected given the nature of the research procedures and the subject population being studied; and (2) Suggest that the research places subjects or others at a greater risk of harm or discomfort related to the research than was previously known or recognized.Unanticipated problems can occur in any type of research (medical or non-medical) and may involve physical, psychological, social, legal, or economic harms.

**Unrelated:** has no association with the research; evidence exists that an outcome is definitely related to an event external to the research.

1. **MANAGING ADVERSE EVENTS**

Reports of potential adverse events should be promptly forwarded to the ORC. ORC staff will process all potential adverse events for the IRB Chair to make an initial review. Actions undertaken in response to an allegation or finding of noncompliance will be completed in a timely manner, based on the circumstances, seriousness, and complexity of the potential noncompliance.

The IRB and Institutional Official (IO) have the authority to suspend or terminate approval of research that is or may be associated with harm to subjects.

# Investigation

1. The ORC will notify the IRB Chair of the potential adverse event.
2. The IRB Chair will conduct an initial investigation into the initial report. Based on the initial investigation, the IRB Chair may determine a claim to be unsubstantiated, form a subcommittee (other supporting units will be included if necessary), assign the investigation to the IRB, or conduct the investigation with ORC staff.
	1. The Institutional Official will be notified of all investigations.
	2. Any individual with a potential conflict of interest may not participate in an investigation.
	3. When an investigation is assigned to the IRB the potential adverse event will be assigned to an agenda. The PI must attend the meeting to provide an overview of the concern and field questions from the Board. After addressing the Board’s requests, the PI will be excused so the Board can discuss the project and issue a determination.
3. The PI will be notified of the investigation and allegation. The PI will provide investigators with sufficient information to conduct the investigation. The ORC will make protocols available. The PI, research staff, or others may be interviewed and/or an audit of the project/lab may be conducted during the investigation. Access to relevant materials (including data) and laboratory space must be provided to the IRB.
	1. If the PI is not responsive or unavailable, the PI’s Department Chair or College Dean will provide investigators with the ability to conduct the investigation.
4. After completing the investigation, the IRB investigators will complete a Determination Report\* that is sent to the study PI, the IO, the IRB, and any other relevant parties.

\**Unsubstantiated claims or minor violations resulting in no further action may not result in a formal determination report. The IO, IRB, and PI will be advised accordingly.*

**Possible outcomes of the investigation as determined by the IRB investigation:**

* Dismissal of the allegation
* Referral to other appropriate university process
* No further action required
* Corrective action(s) required
* Suspension or termination of the project
* Report to external party when required by regulation, law, or policy

# Investigator requests for reconsideration

The study PI may request a reconsideration of the investigation outcome. All requests for reconsideration must be made in writing (email) within five business days of the date of the Determination Report.

**Reference material**

<https://www.hhs.gov/ohrp/compliance-and-reporting/types-of-determinations/index.html>

<https://www.hhs.gov/ohrp/compliance-and-reporting/guidance-on-reporting-incident/index.html>

<https://www.hhs.gov/ohrp/regulations-and-policy/guidance/reviewing-unanticipated-problems/index.html>

Human Subjects Non-Compliant Activity