



Colorado Multiple Institutional Review Board
13001 E. 17th Place
Building 500, Room N3214
Aurora, Colorado 80010-7238

Mailing Address:
Mail Stop F-490
P.O. Box 6508
Aurora, Colorado 80045-6508

(303) 724-1055 [Phone]
(303) 724-0990 [Fax]
www.uchsc.edu/comirb [Web]
comirb@uchsc.edu [E-Mail]
FWA#: FWA00005070

University of Colorado Hospital
Denver Health Medical Center
Veteran's Administration Medical Center
The Children's Hospital
University of Colorado Health Sciences Center
Colorado Prevention Center

01/15/2008

Certificate of Approval

Investigator: E. David Crawford

Sponsor(s): National Cancer Institute

Subject: **COMIRB Protocol 93-377**
Continuing Review (CRV009)
1st

Title:

NATIONAL CANCER INSTITUTE PROSTATE, LUNG, COLORECTAL AND
OVARIAN (PLCO) CANCER SCREENING TRIAL

Approval Date: 8 January 2008

Expiration Date: 8 January 2009

Expedited Category: 8a

Approval Includes: **Protocol - Investigator - 1 Consent Form(s) - Continuing Review**

All COMIRB Approved Investigators must comply with the following:

- For the duration of your protocol, any change in the experimental design/consent and/or assent form must be approved by the COMIRB before implementation of the changes.
- Use only a copy of the COMIRB signed and dated Consent and/or Assent Form. The investigator bears the responsibility for obtaining from all subjects "Informed Consent" as approved by the COMIRB. The COMIRB REQUIRES that the subject be given a copy of the consent and/or assent form. Consent and/or assent forms must include the name and telephone number of the investigator.
- Provide non-English speaking subjects with a certified translation of the approved Consent and/or Assent Form in the subject's first language. A copy of the translator's certification should be attached to the consent and/or assent form.
- The investigator also bears the responsibility for informing the COMIRB immediately of any Serious Adverse Events (deaths, serious complications or other untoward effects of this research at this or other sites), and of the relationship of the SAE to the investigational trial. The COMIRB uses the standard definition of Serious or Unanticipated Events that include: death, hospitalization, prolongation of hospitalization and other unanticipated side effects
- Obtain COMIRB approval for all advertisements before use.
- Federal regulations require a Continuing Review to renew approval of this project within a 12-month period from the last approval date unless otherwise indicated in the review cycle listed below. If you have a restricted/high risk protocol, specific details will be outlined in this letter. Non-compliance with Continuing Review will result in the termination of this study. This project has been assigned the following review cycle:

COMIRB Continuing Review Cycle: 12 months

We will send you a Continuing Review Form to be completed prior to the due date. Any questions regarding the COMIRB action on this study should be referred to the COMIRB staff at 303-724-1055 or UCHSC Box F-490.

Ken Easterday, R.Ph.
Warren Capell, M.D.

Hans Neville, M.D.
Chris Duclos, Ph.D.

Dave Lawellin, Ph.D.
Douglas Ford, M.D.

Steve Bartlett, R.Ph.
Mary Geda, RN, MSN

Revised 03/05

93-377 Panel: A/A Expedited

Not Approved to Enroll Subjects
Recruiting of New Subjects Will
Require New COMIRB Approval



MedStar Research
Institute

**MedStar Research Institute-Georgetown Oncology
Institutional Review Board**

Date October 26, 2007

To: Claudine Isaacs, MD
Hematology/ Oncology
Washington, DC 20057

From: Brandon L. Edmonds, MD
Project Coordinator
Institutional Review Board

Title Prostate, Lung, Colorectal and Ovarian (PLCO) Cancer Screening Trial

IRB# 1993-276

Annual Approval Date September 26, 2007

Expiration Date: September 25, 2008

Action Expedited Continuing Review
Closed to subject enrollment, but subjects still on protocol regimen

Your above referenced protocol and consent form were approved for continuation through expedited review by Dr. Jefferson Moulds, IRB Chairman or the designee on October 23, 2007 and reapproved for a maximum of one year.

This is to inform you that you may continue your project.

Approval for this study is through **September 25, 2008**. The IRB requires that you submit an application for annual renewal at the end of the approval period and/or at study completion. Please note that this office will automatically terminate the project on the date stated above, unless reviewed and re-approved by the IRB. *It is the PI's responsibility to submit the application for annual renewal and the appropriate IRB forms at least one month before the expiration date.*

Please remember to:

1. Seek and obtain prior approval for any modifications to the approved protocol.
2. Promptly report any unexpected or otherwise significant adverse effects encountered in the course of this study to the Institutional Review Board within 7 calendar days. This includes information obtained from sources outside MedStar Research Institute and Georgetown University that reveals previously unknown risks from the procedures, drugs or devices used in this study.

16727
CC: Levy, Sharon

CC: IRB file

OCT 31

Hawaii Pacific Health

Institutional Review Board

1100 Ward Avenue, Suite 1045 • Honolulu, Hawaii 96814 • Phone: (808) 522-4583 • Fax: (808) 522-4335

August 7, 2007

Approval of Required Documentation – Continuing Review

Lance Yokochi, MD
PLCO-Hawaii
839 South Beretania Street
Honolulu, HI 96813

RE: **RP #1993YOKO001**

Project Title: Design of the Prostate, Lung, Colorectal and Ovarian (PLCO) Cancer Screening Trial. (Version: October 1, 2003)

Dear Dr. Yokochi:

The Hawaii Pacific Health Institutional Review Board (IRB) reviewed and approved your project for a further 12 months on July 3, 2007 pending documentation. These documents were requested by the IRB in a letter dated July 11, 2007

These required modifications were received at the IRB on July 18, 2007 and have been reviewed and approved by the IRB via expedited review on August 7, 2007. Your approval dates remain unchanged for the period July 3, 2007 – July 2, 2008. A Continuing Review Report must be submitted on or about May 1, 2008.

Enclosed is your IRB stamped approved Authorization Form which should be used to enroll subjects at your site. Also enclosed is your Annual Study Update survey. These forms will expire on July 2, 2008.

If you intend to make changes during the course of your project which will affect the human subjects involved, you must obtain IRB approval prior to implementing these changes.

Any Serious Adverse Event (SAE) or Unanticipated Adverse Event (UAE) must be reported immediately to either the IRB Chairperson or the IRB Administrative Office. A written report of the SAE or UAE must be submitted to the IRB within five calendar days. Any non-serious adverse events that may not be directly related to the study must also be reported within 45 days.

If you have any questions, please contact Lisa Ann Katagiri at 522-4544.

Sincerely,



David Horio, MD
Chair, Institutional Review Board

DH/nm

Enclosures: Authorization Form
Annual Study Update survey

cc: Victoria Jenkins, Study Coordinator

KAPI'OLANI
MEDICAL CENTER
for Women & Children



KAPI'OLANI
MEDICAL CENTER
at Pali Momi



Straub
CLINIC & HOSPITAL

Wilcox Health



Institutional Review Board

Continuation/Final Report

All submissions must be sent electronically to: research_admin@hfhs.org
 Investigators are responsible for utilizing the most current versions of IRB forms and the IRB has the authority to refuse out of date forms.

Please Indicate: Continuation Final Report For IRB Use Only Expedited Full Board

SECTION 1 INVESTIGATOR INFORMATION

Principal Investigator (PI): **Paul A. Kvale** Department/Division: **BIOSTATS/Pulmonary K-12**

Phone/Pager of PI: **(313)874-4640/(313)601-6318** E-Mail Address of PI: **pkvale1**

IRB #: 112 Current IRB approval period: **7/11/2006 – 7/10/2007**

Complete study title (no acronyms): **Prostate, Lung, Colorectal and Ovarian Cancer Screening Trial (PLCO Study)**

Current source of funding: **NCI/NIH** Is this study currently NIH funded? No Yes (grant #B30017)

If yes, was it originally submitted as such? No (if no, submit copy of grant) Yes

Title of NIH grant (if different):

Current budget period (if federally funded): **10/1/06 – 9/30/07**

Contact Information (if not PI): Name: **Karen Broski** Phone/Pager: **-8747053** E-Mail Address: **kbroski1**

THIS REST OF THIS PAGE IS FOR IRB USE ONLY

Type of IRB Review:

- Full Board
 Expedited (all expedited continuation & final reports are reviewed as informational items at fully convened IRB meetings)

Result of IRB Review:

- Continuation Approved
 Approval Withheld
 Final Report Approved (Closure #)

APPROVAL STAMP
APPROVAL PERIOD
Jul 10, 2007 – Jul 09, 2008
INSTITUTIONAL REVIEW BOARD

The HFHS IRB has read & reviewed this protocol & finds this research is appropriate in design and meets the requirements of the Federal Guidelines, 45 CFR Part 46 and 21 CFR Part 50.

Timothy Roberts PhD

Chairperson or designee - Henry Ford Health System IRB

Date of approval: **07-10-07**

Abstentions:
 Comments:
 Action required:

SECTION 2: UPDATE OF PROJECT ACTIVITY

Please provide a brief yet concise protocol summary. Include the purpose, objective, study design, treatment, and procedures. Do not exceed the space provided.

The Prostate, Lung, Colorectal and Ovarian Cancer Screening Trial (PLCO Study) is the largest randomized cancer screening study at HFHS. PLCO, which is a multi-site trial, is funded by NCI / NIH. This trial will determine the effectiveness of screening tests for prostate, lung, colorectal and ovarian cancers. The trial is designed to assess if early detection will increase life expectancy. From the cohort of participants, the trial will be able to appraise the number of participants who develop cancer, at which stage their cancer is diagnosed, treatment information and their length of survival following diagnosis. The recruitment phase ended in April 2001 with a final enrollment of 24,676 participants at Henry Ford. The clinical screening phase of the study was completed by September 2006. Ongoing activities include; Medical Record Abstracting (includes collection of diagnostic evaluation and treatment information on reported cancers and reported deaths from cancer), Pathology Sample Collection, Death Certificate Ascertainment, Death Data Review, Tracing on Lost Contact participants, Health Status Questionnaire (annual contamination assessment), Annual Study Update and Follow Up Locators on all participants, Breast and Other Cancers data collection, Quality of Life among Prostate Cancer Survivors addendum study, and Occupational Data on Prostate CA Survivors addendum study (completed). Other follow up activities include; data collection by phone, data clean up activities, various mailings; Birthday, Holiday and Sympathy cards and Semi-Annual NCI Newsletters. Subjects are followed for at least 14 years. Abstracting and data collection activities are currently approved to continue through 2011. NCI is looking at an extension of activities through 2014, this is currently pending. The wealth of data collected through the PLCO Study will provide a strong foundation for future medical research. This study will have a tremendous impact on the future of health care delivery in our nation. The PLCO Study can also be seen as an invaluable resource in cancer research and also to Henry Ford research, the medical and scientific communities and society at large.

Current status of study: (Please place a checkmark adjacent to each relevant statement.)

- No subjects have been enrolled. If not, please explain why:
- Research is active (please check appropriate box below)
- Research is still open to enrollment
- Research is permanently closed to subject enrollment, but study remains active for HFHS subjects receiving study treatment.
- Research remains active for long-term follow-up of HFHS subjects and/or data analysis.
- Research remains active for data analysis only or for long-term follow-up of HFHS subjects without any type of intervention/treatment. This continuation will be reviewed through the expedited process.
- Requesting termination. If so, please explain (i.e., final report, research and data analysis complete, study never initiated, sponsor request):
- Other:

SECTION 3 ENROLLMENT UPDATE

1. Targeted accrual goal (indicated on the initial submission) at:
HFHS: **20,000** Multicenter (if applicable): **150,000**
2. Number of subjects enrolled to date (not including screen failures) at:
HFHS: **24,676** Multicenter (if applicable): **154,854**
3. *If your number enrolled to date exceeds your targeted accrual goal, please explain (you must have had IRB and/or sponsor approval to enroll more than targeted):* **NCI initiated an extension of recruitment years and the HFH recruitment target goal was increased by 4000**
 - a. If yes, did you request IRB approval? No Yes
 - b. If yes, did you request sponsor approval? No Yes
4. Number of subjects enrolled since last IRB review:
HFHS: **0** Multicenter (if applicable): **0**
5. For studies that involve chart/medical record review, number of records reviewed:
6. Estimated date of enrollment completion (if complete indicate date of completion): **April 30, 2001**
7. Cumulative HFH accrual by race/ethnic group since study initiation (this satisfies Federal requirements assuring equitable distribution of study subjects):

	Caucasian	African Amer	Hispanic	Asian	Other	TOTALS:
Male	8,256	1,469	193	167	36	10,121
Female	12,085	2,054	225	119	72	14,555
TOTALS:	20,341	3,523	418	286	108	

8. Is there an equitable distribution of ethnic groups? No Yes
If no, provide justification for the inequity. **Distribution reflects areas of recruitment for HFH**
9. Is there an equitable distribution of genders? No Yes
If no, provide justification for the inequity. **At Henry Ford, we were more successful in recruiting women, which represents 59% of our site study population. Overall, through this multicenter study, the male to female recruitment ratio is equitable.**
10. If this study has a low accrual rate to date, please explain why the accrual rate is not what was anticipated (indicate obstacles encountered in enrolling patients):

SECTION 4 PROCEDURAL CHANGES

Have any procedural changes in the protocol been implemented since the study was last approved?
 No Yes, if so provide a concise narrative summary explaining the reasons for the change:

Procedural/Planned Change (list all versions separately, using attached additional pages as necessary)	Date of IRB Approval	Concise Narrative Summary
<i>Protocol amendment</i>		
<i>Revised Informed Consent*</i>		
<i>Advertisement</i>		
<i>Investigator Brochure</i>		
<i>Sponsor notifications</i>		

<i>Data Safety Monitoring Report</i>		
<i>Other: please specify</i>	10-26-06	Extension of T 13 follow up on participants . NCI wants to follow up all participants and end the data collection on all at the same time.
	11-10-06	Occupational Data Collection on Prostate Cancer Survivors addendum study- completed.
	11-10-06	Breast and Other Cancer Data Collection
	11-27-06	Quality of Life Addendum Study

* Note: No consent form revisions can be made in conjunction with this report. Consent revisions must be submitted separately on a Planned Changes form.

Has any new information become available since the last IRB review that was disclosed to enrolled subjects? No Yes, if so please provide a concise narrative summary explaining the reason(s):

Source of Information	Date of IRB Approval	Concise Narrative Summary
Patient Letter		
Revised Informed Consent		
Addendum to consent form		
Verbal Communication		
Other: please specify		

SECTION 5 SUBJECT WITHDRAWALS

Has any HFHS subject been withdrawn (i.e., patient does not fulfill the requirements of the protocol?) for any reason after signing a consent form? Yes No

If yes, please indicate the reason for withdrawal and the total number of patients:

# Withdrawn	Screen failure
<u>1036</u>	Patient request to withdraw
<u>307</u>	Patient's medical status
_____	Treatment toxicity
_____	Patient non-compliance
_____	Physician discretion
_____	Disease progression
<u>2483</u>	Death
<u>278</u>	Other (specify): Lost Contact

Please provide additional information if appropriate:

SECTION 6 SUMMARY OF RESULTS TO DATE

- Is there any pertinent preliminary results available associated with the study? Yes No
If yes, please attach to this report.
- Has this study been audited in the past year by external auditors, not including routine monitoring (i.e. sponsor, FDA)? If so, please submit a copy of the report with this continuation/final report. Yes No

3. Please provide a list of clinically significant protocol deviations in the last year, as determined by the investigator, and subject complaints and the processes put in place to prevent their recurrence.
4. Please describe the means whereby the results of the research are going to be disseminated. NCI plans to disseminate results over time as the different protocols end and the data is analyzed. There is oversight by several internal PLCO subcommittees which are responsible for the review of papers for publication.

SECTION 7 ADVERSE EVENT REPORTING

Since the last review, have there been any unanticipated problems or serious adverse events encountered in HFHS subjects that meet the HFHS IRB criteria for Adverse/unexpected events? (If yes, document in summary table below) Yes No

Since the last review, have you received and reviewed one or more reports of adverse drug reactions or other adverse events from the Sponsor that meet the HFHS IRB criteria for Adverse/unexpected events? (If yes, document in summary table below) Yes No

Number of events by body system				
Body system	# HFHS patients in previous year	# non-HFHS patients in previous year	Total # events (HFHS & non-HFHS) in the previous year (add column 1 & 2)	Total # events (HFHS & non-HFHS) since study start
Allergy/Immunology				
Cardiovascular				
Dermatological				
EENT				
Endocrine/metab				
GI				
Hepatic				
Hematological				
Infection				
Malignancy (1° or 2°)				
Musculoskeletal				
Neurological				
Pain				
Pulmonary				

Renal/GU				
Other				

ALL OF THE ABOVE REPORTS MUST BE SUBMITTED TO THE IRB PRIOR TO THIS CONTINUATION/FINAL REPORT. IF THEY HAVE NOT, PLEASE SUBMIT IMMEDIATELY.

SECTION 8 PRIVACY

1. Where are the names of research subjects kept? **Participant records are stored individually in folders labeled with the study ID number of each. They are maintained in locked cabinets and or locked rooms in a secure area.**
2. Where are signed original consent forms kept? **Each participant consent is kept in their individual file folder. Copies of same were forwarded to HFHS Medical Records department to be added to their HFHS medical record, if they are a known HFH patient.**
3. What provisions do you have in place to ensure confidentiality of data? **All PLCO staff have attended the HIPAA training sessions and confidentiality is reviewed annually with staff. Only approved staff have access to the NCI study databases through a password secure system.**

SECTION 9 CONFLICT OF INTEREST

Principal Investigator: Do you, any member of your family, or any person affiliated with the project have any financial interest, financial relationship, or administrative affiliation with any entity that is providing funds or which has rights to intellectual property resulting from this study?

Yes No If yes, please explain.

IF THIS IS A FINAL REPORT, DO NOT COMPLETE THE REST OF THIS FORM

SECTION 10 PERSONNEL UPDATE (Continuation reports only)

List Key Personnel (other than those listed on page 2; use additional pages as necessary):

	Name	Title	Dept/Division
1	Christine Cole Johnson, PhD	Investigator	BIOSTATS
2	Lois Lamerato, PhD	Investigator	BIOSTATS
3			
4			
5			
6			
7			
8			

Have there been any changes to Key Personnel since last approved? Yes No

If yes, explain changes. **Clinical Coordinator, Debi Emmer RN , has been re-assigned to other studies as we are done with the clinical screening component.**

SECTION 11: CURRENT RISK/BENEFIT ASSESSMENT (Continuation reports only)

Have you become aware of any change in the risk/benefit assessment that would affect a patient's willingness to continue participation in the study? Yes No If yes, please explain:

SECTION 12: CONSENT SUBMISSION (Continuation reports only)

For continuation reports, a copy of the most current consent form must be submitted with the "Approval Stamp" box left blank. The consent form will be stamped with an approval period that matches the approval of this continuation report. **No consent forms should be greater than one year old.**

Is a copy of the current unstamped consent document being submitted with this application?

- Yes No/Not applicable, if so please identify reason:
- Written consent not required (waived originally)
 - Study closed to subject enrollment
 - Other (please explain):

SECTION 13: PRINCIPAL INVESTIGATOR'S ASSURANCE

By submitting this application with my name on it I am bound by these obligations:

- This application for continuing/final review is complete and accurate
- The research will be performed under the direction of the Principal Investigator by trained and qualified personnel
- Informed consent and HIPAA authorization from subjects or their legally authorized representative will be obtained and documented prior to any research activities using the current IRB approved informed consent
- Serious, unexpected adverse events or unanticipated problems will be reported to the IRB, as well as any information that may affect the safe conduct of the research
- The IRB will be informed of any proposed changes in the research or informed consent before changes are implemented, and no changes will occur without prior IRB approval
- **A continuing/final review application will be submitted to the IRB before the deadline at intervals determined by the IRB, but not less than once per year, to avoid expiration of IRB approval**
- A final report will be submitted to the IRB when all research activities have ended
- All Co-investigators, coordinators, staff, and students involved in this research will be informed of their obligations in meeting the above commitments
- Comply with all policies and procedures of Henry Ford Health System Institutional Review Board, as well as with all applicable federal and state regulations and guidelines and Good Clinical Practice guidelines

Subject: IRB Approval of Continuing Review
From: irb@umn.edu
Date: Thu, 30 Aug 2007 23:10:05 -0500 (CDT)
To: engel006@umn.edu

The IRB: Human Subjects Committee renewed its approval of the referenced study listed below:

Study Number: 9302M06411

Principal Investigator: Timothy Church

Expiration Date: 08/27/2008

Approval Date: 08/29/2007

Title(s):

Prostate, Lung, Colorectal and Ovarian (PLCO) Cancer Screening Trial - Screening Centers

This e-mail confirmation is your official University of Minnesota RSPP notification of continuing review approval. You will not receive a hard copy or letter. This secure electronic notification between password protected authentications has been deemed by the University of Minnesota to constitute a legal signature.

You may go to the View Completed section of <http://eresearch.umn.edu/> to view or print your continuing review submission.

For grant certification purposes you will need this date and the Assurance of Compliance number, which is FWA00000312 (Fairview Health Systems Research FWA00000325, Gillette Childrens Specialty Healthcare FWA00004003). Approval will expire one year from that date. You will receive a report form two months before the expiration date.

In the event that you submitted a consent document with the continuing review form, it has also been reviewed and approved. If you provided a summary of subjects' experience to include non-UPIRISO events, these are hereby acknowledged.

As Principal Investigator of this project, you are required by federal regulations to inform the IRB of any proposed changes in your research that will affect human subjects. Changes should not be initiated until written IRB approval is received. Unanticipated problems and adverse events should be reported to the IRB as they occur. Research projects are subject to continuing review.

If you have any questions, please call the IRB office at (612) 626-5654.

The IRB wishes you continuing success with your research.

Human Research Protection Office

Barnes-Jewish Hospital
St. Louis Children's Hospital
Washington University

September 27, 2007

Gerald Andriole, MD
Urologic Surgery
Box 8242

RE: 93-0495
Prostate, Lung, Colorectal and Ovarian (PLCO) Cancer Screening Trial

Dear Dr. Andriole:

The above-stated protocol was reviewed and approved by the Human Research Protection Office (HRPO). Following please find specifics of the approval:

Approval Date:	9/27/2007
Date released for follow-up/data analysis only:	9/27/2007
Expiration Date:	9/26/2008
Research Risk Level:	Minimal
Type of Review:	Minimal Risk Cont. Review (Expedited 9)
Reviewing Committee:	08 MRCR
HIPAA Compliance:	Compliant with Authorization

A subcommittee of WU HRPO members have been designated by the HRPO Chair to review all submissions that meet the criteria for "Expedited" review. All actions and recommendations of the subcommittees are reported to a full board committee in accordance with regulatory requirements for "Expedited" review.

The WU HRPO complies with the regulations outlined in 45 CFR 46, 45 CFR 164, 21 CFR 50, 21 CFR 56. The OHRP Federal Wide Assurance numbers for WUSM, BJH, and SLCH are FWA00002284, FWA00002281, and FWA00002282 (respectively).

If further information is necessary, please contact the HRPO office at (314) 633-7400.

Sincerely,



Philip Ludbrook, M.D.
Associate Dean and Chair


CC: Vivien Gardner



University of Pittsburgh
Institutional Review Board

3500 Fifth Avenue
Ground Level
Pittsburgh, PA 15213
(412) 383-1480
(412) 383-1508 (fax)

MEMORANDUM

TO: Joel Weissfeld, MD
FROM: Robert Sweet, MD, Vice Chair 
DATE: September 5, 2007
SUBJECT: IRB #011219: Early Markers and Etiologic Studies - PLCO

Your renewal was reviewed by the Institutional Review Board and approved at the Full Board Meeting (Committee C) that met on Tuesday, August 21, 2007.

Please include the following information in the upper right-hand corner of all pages of the consent form:

Approval Date: August 21, 2007
Renewal Date: August 20, 2008
University of Pittsburgh
Institutional Review Board
IRB #011219

Please note that it is the investigator's responsibility to report to the IRB any unanticipated problems involving risks to subjects or others [see 45 CFR 46.103(b)(5) and 21 CFR 56.108(b)]. The IRB Reference Manual (Chapter 3, Section 3.3) describes the reporting requirements for unanticipated problems which include, but are not limited to, adverse events. If you have any questions about this process, please contact the Adverse Events Coordinator at 412-383-1504.

The protocol and consent forms, along with a brief progress report must be resubmitted at least **one month prior** to the renewal date noted above as required by FWA00006790 (University of Pittsburgh), FWA00006735 (University of Pittsburgh Medical Center), FWA00000600 (Children's Hospital of Pittsburgh), FWA00003567 (Magee-Womens Health Corporation), FWA00003338 (University of Pittsburgh Medical Center Cancer Institute).

If this research study is subject to FDA regulation, please forward to the IRB all correspondence from the FDA regarding the conduct of this study.

Please be advised that your research study may be audited periodically by the University of Pittsburgh Research Conduct and Compliance Office.

RS:dj



University of Pittsburgh
Institutional Review Board

3500 Fifth Avenue
Ground Level
Pittsburgh, PA 15213
(412) 383-1480
(412) 383-1508 (fax)

MEMORANDUM

TO: Joel L. Weissfeld, MD

FROM: Christopher Ryan, PhD, Vice Chair *Chris*

DATE: August 7, 2007

SUBJECT: IRB #9602115: Prostate, Lung, Colorectal and Ovarian Cancer Screening Trial (UPCI 93-03)

Your renewal of the above-referenced proposal has received expedited review and approval by the Institutional Review Board under 45 CFR 46.110 (7).

Please include the following information in the upper right-hand corner of all pages of the consent form:

Approval Date: August 6, 2007
Renewal Date: August 5, 2008
University of Pittsburgh
Institutional Review Board
IRB #9602115

Please note that it is the investigator's responsibility to report to the IRB any unanticipated problems involving risks to subjects or others [see 45 CFR 46.103(b)(5) and 21 CFR 56.108(b)]. The IRB Reference Manual (Chapter 3, Section 3.3) describes the reporting requirements for unanticipated problems which include, but are not limited to, adverse events. If you have any questions about this process, please contact the Adverse Event Coordinator at 412-383-1504.

The protocol and consent forms, along with a brief progress report must be resubmitted at least **one month prior** to the renewal date noted above as required by FWA00006790 (University of Pittsburgh), FWA00006735 (University of Pittsburgh Medical Center), FWA00006600 (Children's Hospital of Pittsburgh), FWA00003567 (Magee-Womens Health Corporation), FWA00003338 (University of Pittsburgh Medical Center Cancer Institute).

Please be advised that your research study may be audited periodically by the University of Pittsburgh Research Conduct and Compliance Office.

CR:kh

mhtmlmain:

12/4/07 11:25 AM



IRB_00004389

Principal Investigator: Sandra Buys**Title:** Prostate, Lung, Colorectal, & Ovarian Cancer Screening Trial - Screening Centers

This Continuing Review Application has been reviewed and approved by a University of Utah IRB convened board. The convened board approved your study on 11/21/2007. Federal regulations and University of Utah IRB policy require this research protocol to be re-reviewed and re-approved within 1 year from the approval date.

Your study will expire on 11/20/2008 11:59 PM.

Any changes to this study must be submitted to the IRB prior to initiation via an amendment form.

APPROVED DOCUMENTS**Other Documents**

newslettermaster_PLCO_October 2007.pdf

jost_T13 consent letter to participants_final_IRB 2007.doc

[Click CR_00000117](#) to view the application and access the approved documents.

Please take a moment to complete our customer service survey. We appreciate your opinions and feedback.

mhtmlmain:

Page 1 of 1

ST. LUKE'S INSTITUTIONAL REVIEW BOARD PROTOCOL OVERVIEW

June 25, 2007

PROTOCOL TITLE: Prostate, Lung, Colorectal and Ovarian Cancer Screening Trial
PRINCIPAL INVESTIGATOR: Thomas M. Beck, MD
IRB PROTOCOL NO.: 97-10M

REVIEW STATUS:

- Continuing Review
- Amendment
- Revision
- Memo
- Investigator's Brochure
- Revised Consent
- Closure Notice
- Final Report
- Other: PLCO DSMB report summary (11/09/06)
- Full Board Review
- Expedited Review
- Exempt 46.101 (b)
- One Time Emergency Use

PROTOCOL STATUS:

- Open Study
- Closed to Enrollment: September 30, 2000
- Temporary Closure
- Partial Closure
- Other

RISK ASSESSMENT

- High Risk
- Moderate Risk
- Low Risk
- Significant Risk
- Non-Significant Risk

REVIEW TERMS

- Annual
- 6 Month
- Other

PROTOCOL DESCRIPTION: This protocol and consent were initially reviewed and approved by the St. Luke's Institutional Review Board on February 24, 1997. The primary objective of this trial is to determine in people age 55 to 74 at entry whether or not the following are true: A) In males and females screening with flexible sigmoidoscopy can reduce mortality from colorectal cancer and screening with chest x-ray can reduce mortality from lung cancer; B) In males: screening with digital rectal examination plus serum prostate specific antigen can reduce mortality from prostate cancer; C) In females: screening with physical examination of the ovaries, CA125 and trans-vaginal ultrasound can reduce mortality from ovarian cancer.

Patients will be randomized to either a control group in which they will continue to receive whatever their normal routine of health care is or to a intervention group in which they will receive the following examinations; flexible sigmoidoscopy, chest x-ray, digital rectal exam (males only), PSA blood tests (males only), trans-vaginal ultrasound exam (females only), CA125 blood tests (females only).

If any of the participants have a positive screening result, they will be referred to the physician of their choice for further diagnostic evaluation. New patient cancer incidence and mortality will be tracked for all participants during the entire course of the trial. The entire duration of the trial will be approximately 15 years with recruitment into the trial lasting 5 years.

The expanded research includes, in addition to evaluating screening tests, the PLCO Trial also seeks to study factors, which may cause these cancers to develop and progress. Additional research on cancer and other diseases which occur in the participants' age group will be carried out among PLCO Trial participants who volunteer for these additional studies.

Blood not used for the prostate cancer screening test (PSA) or the ovarian cancer screening test (CA 125) will be stored and used in future medical research.

PLCO -- Protocol Overview
 June 25, 2007
 Page 2

FILE HISTORY: Initial Rev-2/24/97; 6/30/97-CR, Rev. consnt; 10/22/97-correspondence on additional consent; 12/15/97 -Expeded trial (4 new prototype consnts), 2/23/98-expanded stdy, final draft consnt.;3/30/98-revised final consnt; 6/29/98-CR; 9/28/98-rev. addtnl consnt; 11/30/98-CR, prtcl screening chnges, revs'd consnt frms.; 11/29/99-CR; 3/27/00-rev.consnt;11/27/00-CR, notice of closure (effc 9/30/00); 11/26/01-CR, letter notifying pts section missing from consnt; 10/28/02-CR, 6 month congrat letter; 6/02/03-Exp Rev, revised HIPAA Addendum; 10/27/03-CR; 10/07/04-expedited, travel reimbursement payment schedule; 10/25/04-CR, change in PSA Assay letter (1/05/04); 12/20/04-Intro letter, study of colonoscopy utilization tool, DSMB letter (11/30/04); 4/25/05-PLCO Annual Study Update/Compliance Letter (3/17/05); 8/29/05-CR, digitization of PLCO chest X-ray films; 2/08/06-Exped Rev, DSMB report (11/10/05), Supplemental Questionnaire, Pathology Specimen Collection (inclusive of a specimen collection specific HIPAA form); 4/20/06-Exped. Revised Pathology Specimen Collection (inclusive of specimen collection specific HIPAA form); 7/31/06-CR


SAFETY REPORTS: (If this is a Continuing Review, please see the attached for full report.)

SUBJECT ENROLLMENT STATUS: To date a total of 3654 subjects are enrolled in the study at this site (30 of which have transferred from Utah and Colorado). 3466 are in long-term follow-up; 180 subjects have died; 38 subjects withdrew consent; and 2 subjects have been lost to follow-up (unable to locate subjects for follow-up information).

CHANGE TO PROTOCOL: Since the last review of the protocol, we have received a continuing review report and a PLCO Data and Safety Monitoring Board annual meeting review letter. No changes have been recommended with respect to patient safety. Please see attached documents for details.

CHANGE TO RISK/BENEFIT: None

CHANGE TO CONSENT FORM: None


 Ted Walters, MD or Norman S. Jensen, JD
 Co-Chairmen

Additionally, for Expedited Review or Exempt Status:
 Crystal E. Spencer
 IRB Manager

06-25-2007
 Date Approved

Items approved at the June 25, 2007, meeting:

Continuing Review
 PLCO DSMB report summary (11/09/06)

Continuing review approval period is valid from:

June 25, 2007 through June 24, 2008

PLCO

DATE SAFETY REPORT NUMBER

8/30/04

- MSTI Patient, chill, shake, pupils pinpoint, trapped air (6/30/04)

NOTE: This may not reflect the SAEs being reviewed at this meeting or those that have not been processed. To find the complete SAE, please see the Safety Report Binders in the IRB office or warehouse storage.

1000 North Oak Avenue
Marshfield, WI 54449-5700715-387-5241
1-800-782-8581
Fax 715-389-3131

MCRF INSTITUTIONAL REVIEW BOARD

FWA # (FWA00000873) (Expires 06/09/2008)

Date: May 01, 2007
PI: DOUGLAS J REDING, MD - 3A1
SP Code: RED10393+PLCO-C Protocol #:
Title: Prostate, Lung, Colorectal and Ovarian (PLCO) Cancer Screening Trial--Screening Centers

The continuing review report for the above named study was reviewed and approved by the Institutional Review Board on May 1, 2007 using Full Committee review. Your project is APPROVED for continuation for one year. This report fulfills the continuing review requirements as set forth in 45 CFR 46.

Another report will be requested before your approval expires. If the project is terminated or completed during the next twelve months the IRB should be so advised.

You are responsible for obtaining IRB prior approval for the following: a) any proposed changes or additions in the research activity (including sponsor-initiated amendments or changes to the proposed study population), b) any proposed increase in the total number of subjects to be enrolled on a study (applies only to studies that received initial full board review) c) any proposed increase in local or site-specific accrual that changes a limit specifically stipulated by the protocol, d) recruitment procedures (IRB must also review specific recruitment documents), e) addition of co-investigators or change of principal investigator, f) addition of research sites, g) new or different subject incentives, h) changes to the consent form/authorization or informed consent process, i) changes to data collection documents that are subject to IRB approval, j) any planned protocol deviations, k) communication of new findings.

THESE CHANGES MAY NOT BE INITIATED WITHOUT IRB REVIEW AND APPROVAL, EXCEPT WHERE NECESSARY TO ELIMINATE APPARENT IMMEDIATE HAZARDS TO THE SUBJECTS.

You are also responsible for promptly reporting to the IRB (within FIVE working days): a) any adverse events that meet the IRB reporting criteria per the "Adverse Events-IRB Reporting and Review" policy (available on the Research Compliance IRB Website), b) data safety monitoring reports (report must be submitted within TEN working days), c) any local deviations not receiving prior IRB approval, d) any new findings that may impact subjects' continued participation, e) any unanticipated problems involving risks to subjects or others.



Stuart Guenther, R.Ph., Vice-Chairperson
Institutional Review Board

c: STUART GUENTHER - 3B1
KAREN A LAPPE - ML3

**Protection of Human Subjects
Assurance Identification/IRB Certification/Declaration of Exemption
(Common Rule)**

Policy: Research activities involving human subjects may not be conducted or supported by the Departments and Agencies adopting the Common Rule (56FR28003, June 18, 1991) unless the activities are exempt from or approved in accordance with the Common Rule. See section 101(b) of the Common Rule for exemptions. Institutions submitting applications or proposals for support must submit certification of appropriate Institutional Review Board (IRB) review and approval to the Department or Agency in accordance with the Common Rule. Institutions must have an assurance of compliance that applies to the research to be conducted and should submit certification of IRB review and approval with each application or proposal unless otherwise advised by the Department or Agency.

1. Request Type <input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> CONTINUATION <input type="checkbox"/> EXEMPTION	2. Type of Mechanism <input type="checkbox"/> GRANT <input type="checkbox"/> CONTRACT <input type="checkbox"/> FELLOWSHIP <input type="checkbox"/> COOPERATIVE AGREEMENT <input type="checkbox"/> OTHER: _____	3. Name of Federal Department or Agency and, if known, Application or Proposal Identification No.
4. Title of Application or Activity Prostate, Lung, Colo-Rectal and Ovarian (PLCO) Cancer Screening Trial Expansion for Minority Enrollment (Supplement Medical Records Abstraction)		5. Name of Principal Investigator, Program Director, Fellow, or Other FOUAD, MONA N

6. Assurance Status of this Project (Respond to one of the following)

- This Assurance, on file with Department of Health and Human Services, covers this activity:
Assurance Identification No. FWA00005960 the expiration date 09/19/2010 IRB Registration No. IRB00000196
- This Assurance, on file with (agency/dept) _____, covers this activity:
Assurance No. _____, the expiration date _____ IRB Registration/Identification No. _____ (if applicable)
- No assurance has been filed for this institution. This institution declares that it will provide an Assurance and Certification of IRB review and approval upon request.
- Exemption Status: Human subjects are involved but this activity qualifies for exemption under Section 101(b) paragraph _____

7. Certification of IRB Review (Respond to one of the following IF you have an Assurance on file)

- This activity has been reviewed and approved by the IRB in accordance with the Common Rule and any other governing regulations by: Full IRB Review on (date of IRB meeting) 10/24/2007 or Expedited Review on (date) _____
 If less than one year approval, provide expiration date _____
- This activity contains multiple projects, some of which have not been reviewed. The IRB has granted approval on condition that all projects covered by the Common Rule will be reviewed and approved before they are initiated and that appropriate further certification will be submitted.

8. Comments Protocol subject to Annual continuing review	Title <u>F970626001</u> Prostate, Lung, Colo-Rectal and Ovarian (PLCO) Cancer Screening Trial Expansion for Minority Enrollment (Supplement Medical Records Abstraction)
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IRB Approval Issued: 10/26/07

9. The official signing below certifies that the information provided above is correct and that, as required, future reviews will be performed until study closure and certification will be provided.	10. Name and Address of Institution University of Alabama at Birmingham 701 20th Street South Birmingham AL 35294
11. Phone No. (with area code) (205) 934-3789	
12. Fax No. (with area code) (205) 934-1301	
13. Email: smoores@uab.edu	
14. Name of Official Ferdinand Urthaler, M.D.	15. Title Chairman, IRB
16. Signature <u>Ferdinand Urthaler, MD/PhD</u>	17. Date <u>10/26/07</u>

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