ATTACHMENTS 26

IRB Approvals for the BEEA Study

26A. NCI SSIRB
26B. Westat – Coordinating Center
26C. University of Iowa Field Station – Iowa Field Station
26D. Batelle Centers for Public Health Research and Evaluation – North Carolina Field Station

6378

CLINICAL RESEARCH PROTOCOL
INITIAL REVIEW APPLICATION

PRINCIPAL INVESTIGATOR (Name of NIH Employee, Institute/Branch, Address, Telephone and email):
Michael Alavanja, NCI/DCEG/OEEB, 301-435-4720

PROTOCOL TITLE:
Study of Biomarkers of Exposure and Effects in Agriculture

ABBREVIATED TITLE (30 characters or less): Biomarker Study

PROPOSED START DATE: 3/1/10 END DATE: 2/28/15 TOTAL SUBJECTS TO BE ACCRUED (Attach larger table for Phase 3-4): 1600

MULTI-SITE COLLABORATION:
Is this a multi-site collaboration? ☒ Yes (complete this section) ☐ No
Will subjects participate on the protocol at the NIH CC? ☐ Yes ☒ No
Will subjects participate on the protocol at other sites? ☒ Yes ☐ No
If yes, are the sites ☒ Domestic ☐ Foreign ☐ Both
Is NIH the coordinating site?
☐ Yes. For each participating site, provide: institution name, address, investigator(s), indicate if subjects will be recruited and if they are, include a contact name on attached sheet/protocol face sheet.
☒ No. Coordinating Site is Westat

REQUESTED ACCRUAL EXCLUSION (Check all that apply):
☐ None ☐ Asian
☐ Male ☐ Black or African American
☒ Female ☐ White
☒ Children <16 ☐ Hispanic or Latino
☐ American Indian/ Alaskan Native ☐ Native Hawaiian or Pacific Islander

SUBJECT ACCRUAL CHARACTERISTICS:
Minimum Age Permitted 30
Maximum Age Permitted n/a
Pediatric ☒ None ☐ <2 Yr. ☐ 2-6 Yrs. ☐ 7-17 Yrs.
Protocol involves healthy volunteers? ☒ Yes ☐ No
Are Healthy Volunteers NIH Employees? ☐ Yes ☒ No
Does the protocol permit self referral? ☐ Yes ☒ No
Will the protocol involve adults unable to give informed consent? ☐ Yes ☒ No

PROTOCOL TYPE: (Check one):
☐ Screening
☐ Training
☐ Natural History – Disease Progression/ Physiology
☒ Natural History – Sample/Data Collection or Analysis (Recruiting Patients)
☐ Natural History – Sample/Data Collection or Analysis (Not Recruiting Patients)
☐ Pharmacokinetics/Dynamics
☐ Clinical Trial: Identify Phase (Check one)
☐ Phase 0 ☐ Phase 1 ☐ Phase 1-2
☐ Phase 2 ☐ Phase 3 ☐ Phase 4

If a Phase 3 Clinical Trial, is analysis for sex, racial/ethnic subgroups required according to the NIH Policy and Guidelines on the Inclusion of Women and Minorities as Subjects in Clinical Research? ☐ Yes ☐ No ☐ N/A

KEY WORDS (Words or phrase that describe the protocol.)
1. Agricultural Health Study
2. Multiple myeloma
3. MGUS
4. Leukemia
5. Biorepository

IONIZING RADIATION USE (X-rays, e.g., CT; radioisotopes, e.g. PET; etc.): check all that apply
☒ None ☐ Medically indicated ☐ Research indicated*
*Complete NIH-88-23a, and attach to this application. Send a copy of entire protocol and NIH-88-23a to Chair, Radiation Safety for concurrent review).

INVESTIGATIONAL NEW DRUG/DEVICE: ☒ None ☐ IND ☐ IDE
If reporting more than one IND/IDE, list on attached sheet.
FDA No.
IND/IDE Name:
Sponsor:
Who is the manufacturer of the above entity:

Does the protocol involve a Tech Transfer Agreement? ☐ Yes ☒ No

Does the protocol involve a drug/device/product that may lead to you or the NIH receiving payment and/or royalties?
☐ Yes (Append a statement of disclosure)
☒ No

Has the NIH IRP COI Guide been distributed to NIH Investigators?
☒ Yes ☐ No

Has the NIH IRP COI Guide been distributed to Non-NIH Investigators?
☒ Yes ☐ No ☐ N/A

CONFLICTS OF INTEREST REVIEW:
Date submitted to IC DEC: 12/9/09 Date cleared by IC DEC: 12/10/09

Is an Extramural Investigator an ADJUNCT PRINCIPAL INVESTIGATOR? ☐Yes ☒No
Name of Adjunct PI:

MEDICAL ADVISORY INVESTIGATOR (If necessary) Name, Inst/Branch, Telephone, Address, Email and initial line:

LEAD ASSOCIATE INVESTIGATOR – Name, Inst/Branch, Telephone, Address, Email. Check box if an NIH employee and initial line:
☒ See attached Ola Landgren - per PI/PC

RESEARCH CONTACT: Name, Inst/Branch, Telephone, Address, Email. Check box if an NIH employee and initial line:
☐

ASSOCIATE INVESTIGATOR(S): Name, Institute/Branch, Telephone, Address, Email. Check box if an NIH employee and initial line. Attach list if necessary.
1. ☐ See attached
2. ☐
3. ☐
4. ☐
5. ☐

(Principal Investigator: Be sure to include PRECIS <=400 words as first section of protocol)

SIGNATURE	Michael C Alavanja Principal Investigator	MICHAEL ALAVANJA Print/Type Name	Date 1/4/2010	Send to Accountable Investigator
RECOMMENDATION	Michael C Alavanja Accountable Investigator	MICHAEL ALAVANJA Print/Type Name	1/4/2010	Send to Branch Chief, or CC Dept. Head of Accountable Investigator
	Debra Silverman Br. Chief/CC Dept. Head of Acct. Invest.	Debra Silverman Print/Type Name	Date 1/4/10	Send to Institute/Center Scientific Review Committee
APPROVALS	For Institute/Center Scientific Review Comm.	Robert N. Hoover Print/Type Name	Date 4/16/10	Send to Clinical Director
	Clinical Director	William Dam Print/Type Name	Date 4/16/10	Send to Chair, Institutional Review Board
	Chair, For Institutional Review Board	Nancy Potischman Print/Type Name	Date 4/14/10 Protocol & Consent Approval Completed	Send to Office of Protocol Services, through IRB Protocol Coordinator
PATIENT SAFETY/ RESOURCE REVIEW	Director, Clinical Center	Print/Type Name	Date 5/11/10	Return to Office of Protocol Services. (10/152318)
COMPLETION	Protocol Specialist		Date 05/13/10	PROTOCOL NO. 10-C-N106

"Offsite" - NO PRETA Required.

*

CLINICAL RESEARCH PROTOCOL

INITIAL REVIEW APPLICATION – Page 2

PI: Michael Alavanja, 301-435-4720

The following data elements are required by the National Library of Medicine for posting on clinicaltrials.gov and meets the registration requirements set forth by the International Committee of Medical Journal Editors (ICMJE) for publishing. http://www.clinicaltrials.gov

CONDITIONS: Select up to 5 primary diseases or conditions being studied, using NLM Medical Subject Heading (MeSH) controlled vocabulary. The conditions are used to index studies. http://www.nlm.nih.gov/mesh/MBrowser.html

1. Multiple myeloma
2. Leukemia
3. MGUS
4. MBL
5.

STUDY TYPE: Nature of the investigation. Select Interventional or Observational, in addition to the most appropriate term describing the protocol for each of the corresponding categories.

☐ **Interventional Studies**	☒ **Observational Studies**
Purpose: Reason for the protocol ☐ Treatment ☐ Prevention ☐ Diagnosis ☐ Educate/Train	Purpose: reason for the protocol ☒ Natural History ☐ Screening ☐ Psychosocial
Study Design: participant selection ☐ Randomized Trial ☐ Non-randomized Trial	Duration of Sampling: protocol sample in ☐ Longitudinal ☒ Cross-sectional
Masking: knowledge of intervention ☐ Open ☐ Single Blind ☐ Double Blind	Selection Method: sample selection ☐ Targeted Population ☒ Random Sample ☐ Case Control
Control: nature of the interventional control ☐ Placebo ☐ Active ☐ Uncontrolled ☐ Historical ☐ Dose Comparison	Timing: data collection period ☒ Retrospective ☐ Prospective ☐ Both
Assignment: intervention groups ☐ Single Group ☐ Parallel ☐ Cross-over ☐ Factorial ☐ Expanded Access	
Endpoint: primary outcome that the protocol is designed to evaluate ☐ Safety ☐ Efficacy ☐ Safety/Efficacy ☐ Bio-equivalence ☐ Bio-availability ☐ Pharmacokinetics ☐ Pharmacodynamics ☐ Pharmacokinetics/pharmacodynamics	

COMPLETE FOR INTERVENTIONAL STUDIES ONLY

INTERVENTIONS: Provide up to 10 primary interventions identifying a category for each. Category selections are: Drug, Gene Transfer, Vaccine, Behavior, Device, and Procedure.

	Category	Intervention		Category	Intervention
	Ex. Drug	AZT		Ex. Behavior	Hypnosis
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

OUTCOME MEASURE(S)/ENDPOINT(S): Examples – changes in cardiac output, changes in cognitive function, changes in drug or antibody.

Primary: main outcome representing a primary study question(s). (limit 250 char) ____

Secondary: outcome(s) of interest to a study, but not representing the primary study question(s). (limit 250 char) ____

NATIONAL INSTITUTES OF HEALTH CLINICAL CENTER Public Health Service

Warren G. Magnuson Clinical Center
Mark O. Hatfield Clinical Research Center

Building 10, Room 1S231B
10 Center Drive, MSC 1192
Bethesda, MD 20892
Telephone: (301) 496-0744

Date: May 13, 2010

To: Michael Alavanja, Ph.D.
EPS/8109

From: Cherie Bonds-Beeken, Protocol Specialist
Office of Protocol Services

Subject: Initial Protocol Approval

Title: Study of Biomarkers of Exposure and Effects in Agriculture

Protocol Number: 10-C-N106

The final patient safety and resource review was conducted by John I. Gallin, M.D., Associate Director for Clinical Research of the National Institutes of Health Clinical Center on 05/11/2010. The Office of Protocol Services has assigned your intramural research protocol, number **10-C-N106** which will be due for continuing review on **01/19/2011**.

OPS or your IRB Office will notify you 120 days prior to the review. However, Federal regulation and NIH policy require that you report promptly any unanticipated problems involving risks to subjects or others, or serious harm involving subjects, to your IRB. In addition, substantive changes in research activities, during the period for which IRB approval has been given, may not be initiated by you without prior review and approval by your IRB, except where necessary to eliminate apparent immediate hazard to subjects.

If you have any questions regarding protocol review, approval or reporting procedures, please contact Lynn Sayers, your Protocol Coordinator at (301) 402-7221.

cc: Protocol Coordinator

Westat | An Employee-Owned Research Corporation

Memo

Date: April 28, 2010

To: Marsha Dunn and Kate Torres, Co-Directors

From: Kerry Levin, Chair Westat IRB Kerry Levin

Subject: **Expedited Approval of "Study of Biomarkers of Exposures and Effects in Agriculture", Project 8494.28.01**
FWA 0551

As Chair of the Westat Institutional Review Board (IRB), I reviewed the materials submitted for the following: **Biomarkers of Exposures and Effects in Agriculture, Project 8494.28.01.** The Westat IRB reviews all studies involving research on human subjects. This study is being funded by National Cancer Institute and the Environmental Protection Agency. The National Cancer Institute is the proposed IRB with oversight of human subjects protections for this study.

The purpose of this study is to collect questionnaire data and biological specimens from 1,600 pesticide workers (ages 50 and above) to determine if there is an increased risk of cancer associated with exposure to occupational and environmental chemical and substances.

As the study's Coordinating Center, Westat will be responsible for the following:

- Programming questionnaires
- Documenting study procedures
- Training field staff on data collection procedures
- Processing participant data
- Monitoring activities in the field
- Handling the supply, shipment, tracking and receipt of the biospecimens

Westat will not have access to identifiable data. All data transactions will be completed using a study identification number. Password protected laptops will be used in the field and paper copies stored in securely locked cabinets.

The IRB regulations permit expedited review of certain activities involving minimal risk [45 CFR pt. 46.110 (b) (1)]. This study can be considered minimal risk and is approved under expedited authority. A request for a waiver of documented informed consent is also approved (45 CFR 46 117) to obtain verbal consent over the telephone and inquire about cancer screening practices. Documented informed consent will be collected at the scheduled home visit.

If activities change, please contact the IRB Office to ensure that the status is accurately reflected in our records. You are required to submit the study for a continuing review on or before April 28, 2011. In the interim, you are responsible for notifying the IRB Office as soon as possible if there are any injuries to the subjects, problems with the study, or changes to the study design that relate to human subjects.

cc: Institutional Review Board
Susan Crystal-Mansour

D412400

OMB No. 0990-0263

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.

201002777

1. Request Type
☒ ORIGINAL
☐ CONTINUATION
☐ EXEMPTION

2. Type of Mechanism
☐ GRANT ☒ CONTRACT ☐ FELLOWSHIP
☐ COOPERATIVE AGREEMENT
☐ OTHER:_____

3. Name of Federal Department or Agency, or organization, and, if known, Application or Proposal Identification No.
US Department of Health & Human Services, National Institutes of Health
HHSN261200455003C Mod 17

4. Title of Application or Activity
Biomarkers of Exposures and Effects in Agriculture (BEEA) Study

5. Name of Principal Investigator, Program Director, Fellow, or Other
Charles Lynch

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. FWA00003007, the expiration date 03/30/2013 IRB Registration No. IRB00000099

☐ 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 -- date of IRB meeting: or ☒ Expedited Review
Approval Date: 03/29/10
Expiration Date: 03/29/11

☐ 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

Contract Title: The Agricultural Health Study - Iowa Field Station

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.

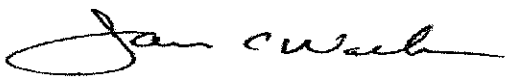
10. Name and Address of Institution
The University of Iowa
Human Subjects Office
Office of the Vice President for Research
340 Medicine Administration Bldg
The University of Iowa
Iowa City, IA 52242-1101

11. Phone No. *(with area code)* 319-335-6564
12. Fax No. *(with area code)* 319-335-7310
13. Email: James-walker@uiowa.edu

14. Name of Official
James C Walker, PhD

15. Title
Associate Vice President for Research - Regulatory Affairs

16. Signature



17. Date
03/29/10

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Sponsored by HHS

March 10, 2010

Charles E. Knott, MPA, PMP
Battelle CPHRE
100 Capitola Drive, Suite 200
Durham, NC 27713

Dear Mr. Knott:

As Chair of the Battelle/CPHRE Institutional Review Board (IRB) I have reviewed the full study implementation submission dated 3/3/2010 for the study entitled "Study of Biomarkers of Exposures and Effects in Agriculture, AHS Ancillary" (FG004905-Y102) and grant expedited approval to proceed with the study. The study is minimal risk.

As with all Battelle/CPHRE studies, this study will be subject to continuing review next year. The current approval expires 3/9/2011. We will send you notification at the appropriate time. In the meantime, should any changes occur in your protocol, please inform the IRB and submit the changes for review. Similarly, the IRB needs to be notified in the event of any injury or unexpected outcome arising from this study.

Sincerely,

Margaret R. Pennybacker, PhD
IRB Chair

cc: Brigette Brevard
Contracts
Jan Jaeger

Battelle/Centers for Public Health Research and Evaluation

100 Capitola Drive, Suite 200
Durham, NC 27713
Federal-wide Assurance No. FWA00004696 (IRB No. 284)

INSTITUTIONAL REVIEW BOARD NOTICE OF APPROVAL

PROJECT DIRECTOR: Charles Knott

PROJECT TITLE: Study of Biomarkers of Exposures and Effects in Agriculture, AHS Ancillary

CLIENT: Westat (NCI funding) PROTOCOL DATE: 3/3/10

BATTELLE PROJECT CODE: FG004905-Y102 or PROPOSAL NUMBER: _ *(if preaward)*

NATURE OF REVIEW: *(check one)*

- [ ] FULL MEETING DATE: _____
- [X] EXPEDITED *(specify reason)*: minimal risk
- [ ] EXEMPT *(specify reason)*: _____

TYPE OF APPROVAL: *(check one)*

- [ ] PRELIMINARY. SCHEDULE NEXT REVIEW PRIOR TO INVOLVEMENT OF HUMAN SUBJECTS.
- [ ] PRETEST/PILOT TEST. SCHEDULE NEXT REVIEW PRIOR TO FULL IMPLEMENTATION.
- [X] FULL IMPLEMENTATION.
- [ ] RENEWAL/CONTINUING REVIEW.
- [ ] AMENDMENT DATED

Please note the following requirements:

PROBLEMS OR ADVERSE REACTIONS: If any problems in treatment of human subjects or unexpected adverse reactions occur as a result of this study, you must notify the IRB Chairperson immediately, then complete an Adverse Event/Incident Report and forward it to the CPHRE IRB Administrator.

CHANGES IN PROTOCOL: If there are any changes in procedures or study protocol, you must notify the IRB Chairperson and submit the revisions for review before they are implemented.

RENEWAL: You are required to apply for renewal of approval at least annually for as long as the study is active unless the Board finds it necessary to require more frequent reviews. Your next continuing review date should be on or before 3/9/11.

Margaret Penny Baker
IRB Chairperson

3/10/10
Date

Margaret R. Pennybacker, PhD
Print or Type Name

__X__ Copy of approved Informed Consent on file.

cc: Project Director
IRB Administrator