

NCI Pediatric CIRB

REVIEWER WORKSHEET

Continuing Review of Cooperative Group Protocol

| | OMB #0925-xxxx Expiry Date: xx/xx/xxxx | | | |
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| reviewing collection information aspect of | NOTIFICATION TO RESPONDENT OF ESTIMATED BURDEN reporting burden for this collection of information is estimated to average 1 hour per response, including the time for ring instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the on of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of reation unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 alge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-xxxxx*). Do not return the completed form to this address. | | | |
| STUD | DY ID: | | | |
| STUD | DY TITLE: | | | |
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| NAME OF CIRB REVIEWER: | | | | |
| DATE COMPLETED: | | | | |
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| 1. | I have reviewed the following documents (check all that apply): NCI Adult/Pediatric CIRB Application for Continuing Review Study Protocol Cooperative Group Model Informed Consent Document(s) | | | |
| | CIRB Approved Informed Consent Document(s) | | | |
| | DSMB/Safety Monitoring Committee ReportPresentations or publications for the study | | | |
| | Relevant information relating to participants' risks and benefits Management plan to address new or revised conflicts of interest Other (specify): | | | |
| 2. | Are there any important changes in the risks, benefits, or protocol schedule that you believe have an impact on the CIRB's approval of this protocol? | | | |
| | □ No | | | |

| | | Yes | | | |
|---------------------------|--|--|--|--|--|
| 3. | In your judgment, do the benefits of this study continue to outweigh the risks? | | | | |
| 4. | ☐ ☐ ☐ If No o | Yes No Uncertain or Uncertain, please explain: | | | |
| 5. | Do you recommend that the CIRB approve continuation of this study? | | | | |
| | | Yes No Uncertain | | | |
| 6. | If No or Uncertain, please explain: | | | | |
| 7. | Additional Remarks | | | | |
| Pediatric Risk Assessment | | | | | |
| 8. | 45 CFR 46.404: Research no involving greater than minimal risk | | | | |
| | | Minimal Risk Explanation based on study documentation: | | | |
| | | Adequate provisions are made for soliciting the assent of the children and the permission of their parents or guardians, as set forth in 46.408. Explanation based on the study documentation: | | | |
| Permission required from | | | | | |
| | | One Parent Both Parents | | | |
| 9. | 45 CFR 46.405: Research involving greater than minimal risk but presenting the prospect of direct benefit to the individual subjects | | | | |
| | | Greater than minimal risk Explanation based on study documentation: | | | |
| | | Prospect for direct subject benefit Explanation based on study documentation: | | | |
| | | The risk is justified by the anticipated benefit to the subjects Explanation based on study documentation: | | | |

| | | The relation of the anticipated benefit to the risk is at least as favorable to the subjects as that presented by available alternative approaches Explanation based on study documentation: | | | |
|--------------------------|---|--|--|--|--|
| | | Adequate provisions are made for soliciting the assent of the children and permission of their parents or guardians, as set forth in 46.408. Explanation based on study documentation: | | | |
| Permission required from | | | | | |
| | | One Parent Both Parents | | | |
| 10. | 45 CFR 46.406: Research involving greater than minimal risk and no prospect of direct benefit to individual subjects, but likely to yield generalizable knowledge about the subject's disorder or condition | | | | |
| | | Greater than minimal risk Explanation based on study documentation: | | | |
| | | The risk represents a minor increase over minimal risk Explanation based on study documentation: | | | |
| | | The intervention or procedure presents experiences to subjects that are reasonably commensurate with those inherent in their actual or expected medical, dental, psychological, social, or educational situations Explanation based on study documentation: | | | |
| | | The intervention or procedure is likely to yield generalizable knowledge about the subjects' disorder or condition which is of vital importance for the understanding or amelioration of the subjects' disorder or condition Explanation based on study documentation: | | | |
| | | Adequate provisions are made for soliciting assent of the children and permission of their parents or guardians, as set forth in 46.408. Both parents will provide permission. Explanation based on study documentation: | | | |
| 11. | opport | 15 CFR 46.407: Research not otherwise approvable which presents an approvable to understand, prevent, or alleviate a serious problem affecting the alth or welfare of children | | | |
| | | The IRB does not believe meets the requirements of 46.404, 46.405, 46.406 Explanation based on study documentation: | | | |
| | | The IRB finds that the research presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children Explanation based on study documentation: | | | |

12. 45 CFR 46.408: Requirements for assent by children Assent requirement waived Capability of some or all of the children is so limited that they cannot reasonably be consulted OR Procedure involved in the research holds out a prospect of direct benefit that is important to the health or well-being of the children AND the intervention is available only in the context of the research OR Assent may be waived in accord with 45 CFR 46.116 Explanation based on study documentation: Assent required Age where assent is expected. Standard age ranges will be determined and provided as options. 13. **Questions for the Study Team** Questions included below will be sent to the Study Team in advance of the CIRB meeting. Whenever possible, CIRB Operations Office staff will forward responses received prior to the meeting to the primary reviewers and post those responses in ePanel. In order to ensure questions are sent to the Study Chair, questions should be posted here in ePanel at least 36 hours prior to the CIRB meeting. 14. **Topics for CIRB Discussion** List below any topics requiring discussion among the CIRB members prior to a final assessment of the study (e.g. whether inclusion of individuals with impaired decision-making is appropriate). 15. **Proposed Stipulations** Changes or additional information that the CIRB requires before the study can be approved should be listed below. The changes or requested information must pertain to the regulatory criteria for approval or have a direct impact on the protection of study participants. 16. Recommendations List recommended changes below. Recommended changes do not relate to the regulatory criteria for approval nor do they relate to protection of study

participants. The Study Chair may opt to address the recommendations, or may

disregard them.