

# RSC Submission Guide

## Review process recap



## Committee Determinations

### Approve:

An approval form is issued to the submitter and the project is ready for IRB/GCO submission.

### Conditionally Approve:

The project must be edited and then resubmitted for review by the committee. This project is not ready for IRB/GCO submission.

### Deny:

The committee has denied the project. A decision letter detailing reasons for the committee's decision is sent to the submitter. If these issues are corrected, the project can be resubmitted for committee review.

# Submission Guide: Research Question and Endpoints

## Research Question and Study Significance:

- The research question should be well-defined.
  - Ex.) Terms like "good recovery" are very broad. What indicators will be used to determine a good recovery?
- Study significance: Discuss the gap in knowledge that this study aims to address and how this study will address this gap. How will this benefit the field and/or those that this condition affects?

## Primary and Secondary Endpoints

- These are usually presented in bullets and are directly linked to the outcomes of statistical analysis
- Ex.) Primary Endpoint:
  - The proportion of subjects with good clinical outcome defined as Modified Rankin Score (mRS) of  $\leq 2$  as assessed by a blinded assessor at 90 days ( $\pm 15$  days)

# Submission Guide: Stats and Enrollment

## Statistical Plans

- How do these meet primary and secondary endpoints? Are plans appropriate for the sample size/study goals?
- Plan on who will conduct statistical analyses before data is collected. Be sure that this person is qualified to do so and assess any costs associated with outsourced analyses.

## Enrollment Goal

- Make sure this number is realistic and appropriate. Bigger estimations are not always better, especially if more complex statistical plans call for a larger sample size than is feasible ex.) rare diseases.
- Conflicting studies that draw from the same patient pool should be considered when defining the enrollment goal
- Is this goal feasible for the size of the study team? Will someone be able to cover recruitment and enrollment outside of business hours?

# Submission Guide: Recruitment and Consent

## Subject Population

- Inclusion and exclusion criteria should be specific and clear.

## Recruitment Plan

- Walk reviewers through how potential participants will be identified and approached.
- Keep in mind that the treating team must grant the study team permission to approach the patient for research purposes.

## Consent Process

- Include plans related to consent, assent, where documents will be stored and whether teleconsent will be sought.
- For retrospective studies (most commonly): will a waiver of consent be sought?

# Submission Guide: Study Team and COI

## Risks

- Loss of data/confidentiality is almost always a risk. Include this in your submission.
- Be sure to not only include risks, but specify how these risks will be mitigate or managed
  - Ex.) "De-identified data will be stored on a HIPAA compliant database and will only be accessible by the research team"

## Database Considerations

- If PHI will be stored for research purposes, it must be stored in a HIPAA compliant database.
- All databases must be assessed and approved by IT security. If the database has not been authorized, it must be submitted for approval. This process may take a few weeks.

# Submission Guide: Study Team and COI

## Study Team and Required Effort

- The workload must be manageable for the size of the study team.
  - Please note that the department only provides CRC assistance for funded studies
- How long will data entry take per patient? Who will enter data, conduct follow-up procedures, be responsible for consent and randomization procedures? Are there multiple sites where these procedures will occur?

## Conflicts of Interest

- This applies to PI's and Sub-I's. If your faculty mentor has a conflict of interest, the committee may suggest selecting another mentor for this project.