

## IRB Initial Application (Version 1.0)

### 1.0 General Information

**\*Please enter the full title of your study:**

Copy of Example IRB Application - Retrospective (chart review)

**\*Please enter the acronym or short title you would like to use to reference the study (not the IRB number):**

Example

\* This field allows you to enter an abbreviated version of the Study Title to quickly identify this study.

### 2.0 Add Department(s)

**2.1 Select the clinical specialty(ies) associated with this study:**

Primary Dept?	Department Name
<input type="radio"/>	Beaumont Health System - Administrative/non-clinical
<input checked="" type="radio"/>	Beaumont Health System - Emergency Medicine - please select appropriate department

**3.0 Assign key study personnel (KSP) access to the study:** The current study status requires an amendment to change research. All Key Personnel are required to have up to date CITI training and an COID annually. There may be some exceptions to the specific research. If there is an amendment pending on the research you will be blocked to submit a second approved.

**3.1 \*Please add a Principal Investigator for the study:**

PI name here – should be your mentor or mentor proxy

**3.2 If applicable, please select the Research Staff personnel:**

A) Additional Investigators

Student name here  
Co-Investigator

B) Research Support Staff

Jankowski, Michelle  
Biostatistician  
Keeley, Jacob H  
Biostatistician  
Wunderlich-Barillas, Tracy  
Other role - not employed by the Research Institute

**3.3 \*Please add a Study Contact:**

Student Name  
Wunderlich-Barillas, Tracy

The Study Contact(s) will receive all important system notifications along with the Principal Investigator. (e.g. The project contact(s) are typically either the Study the Principal Investigator themselves).

## 4.0 Study Information 1/21/19

### 4.1 Form being completed by:

Name:

Student Name

Title:

Medical Student

Department:

OUWB School of Medicine

Phone number:

Student phone number

Email address:

Student OU email

### 4.2 Describe the purpose of this application:

**If this is International Research select External IRB**

- Entering a new study application for review by Beaumont Health IRB
- Entering a request to submit study to External IRB

### 4.4 Is this a Nursing Evidence Based Project, Quality Project or Research (e.g., a nurse, Nurse Practitioner is the PI of the study)?

All nursing Evidence Based Projects (EBP)/Quality Projects/Research must be approved by the Corporate Nursing Inquiry Evidence Base to IRB submission.

Yes  No

4.5 Is this project part of a training or educational requirement (i.e., degree requirement, residency, fellowship)?

Yes  No

4.6 Are there students, trainees, residents or fellows working on this study?

Yes  No

4.7 Complete the Educational Requirement Table below:

If Yes, complete table below:

Resident/Fellow/Student Name	Program	University (enter N/A for residents)
Student Name	<input type="radio"/> Residency <input type="radio"/> Fellowship <input checked="" type="radio"/> Medical Student <input type="radio"/> Anesthesia	OUWB

	<input type="radio"/> Nursing <input type="radio"/> Pharmacy <input type="radio"/> PT/OT/Rehab <input type="radio"/> Health Administration <input type="radio"/> Other	
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**4.8 Is this an Embark project for the Oakland University William Beaumont School of Medicine?**

Yes  No

Please include Tracy Wunderlich-Barillas, Michelle Jankowski and Patrick Karabon as Key Personnel for the study (see Section 3). You will also be required to submit Embark the application, just prior to submission.

**4.9 Is a student, resident or fellow taking a lead role in the research (i.e. co-investigator)?**

Yes  No

Who is the mentor?

**Mentor must be included as key personnel.**

Wunderlich, Tracy

**5.0 Atypical Research**

**5.1 Does this application cover one of the types of atypical projects listed below? If so, select the type.**

- N/A - Does not apply to study
- Single Time Emergency Use (differs for a compassionate use because of the emergency use of the test article)
- Compassionate use/expanded access use for a single patient, intermediate group (more than one patient) or widespread expanded access use
- Humanitarian Use Device
- Administrative Pre-Grant Acknowledgment

## 6.0 Project Identification

### 6.1 Phase of study: **(For chart review select N/A)**

- N/A
- I/Pilot
- I/II
- II/Feasibility
- II/III
- III/Pivotal
- IV/Post Market

### 6.2 Did a Beaumont Investigator write or develop the protocol independent of a sponsor?

- Yes
- No

**6.3 Is your study funded, in part or wholly, by the National Institute of Health (includes any of the NIH agencies or by a federal sub-contract organization)?**

**If you answer yes above, this means your study is federally funded requiring the COI training. If COI training is not completed for all K be modifications to remove the individual without the required training.**

Yes  No

**6.4 Location of Study**

**For chart review studies, only check the location(s) where the research team is physically located collecting data (NOT where participants are located).**

- Beaumont - Royal Oak
- Beaumont - Troy
- Beaumont - Grosse Pointe
- Beaumont - Dearborn
- Beaumont - Farmington Hills
- Beaumont - Taylor
- Beaumont - Trenton
- Beaumont - Wayne
- Physician Offices
- Other

## 7.0 Determining Human Participant Research

**7.1 If you think your project is Evidence Based/Quality or you would like help in determining whether your project meets the definition of H YOU ANSWER "NO", THE IRB APPLICATION WILL AUTOMATICALLY BRANCH TO RESEARCH.**

If you do NOT have experience with research or are unsure whether your project meets the regulatory determination of human participant

Yes  No

## 8.0 Human Participant Research Determination

Federal regulations and Beaumont Hospitals (BH) policies require IRB review of research involving human participants that meet the regulatory definitions of “research” and “human participants” constitute human participants. IRB approval and oversight.

### 8.1 45 CFR 46.102(e):

**Human subject** - means a living individual about whom an investigator (whether professional or student) conducting research: (i) Obtains, uses, or discloses identifiable private information; or (ii) Obtains, uses, or discloses identifiable biospecimens; or (iii) Obtains, uses, or discloses identifiable private information or identifiable biospecimens; or (iv) Intervenes or interacts with the individual, and uses, studies, or analyzes the information or biospecimens; or (v) Obtains, uses, or discloses identifiable private information or identifiable biospecimens.

**Intervention** includes both physical procedures by which data are gathered (for example, venipuncture) and manipulations of the subject or the subject's environment that are performed for research purposes.

**Interaction** includes communication or interpersonal contact between researcher and subject.

**Private information** includes information about behavior that occurs in a context in which an individual can reasonably expect that no one other than those designated as researchers will have access to it and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, medical or record information). Private information must be individually identifiable. *Individually identifiable* includes where the identity of the subject or researcher or associated with the information.



Use the definitions above to answer the following questions:

8.2 Do the proposed activities include scholarly and journalistic activities (e.g., meta analysis of the current literature, single case report, journal article, biography, literary criticism, legal research, and historical scholarship), including the collection and use of information, that focus directly on the information is collected?

Yes  No

8.3 Do the proposed activities involve public health surveillance activities, including the collection and testing of information or biospecimens, that are ordered, required, or authorized by a public health authority?

*Such activities are limited to those necessary to allow a public health authority to identify, monitor, assess, or investigate potential public health threats, outbreaks, or conditions of public health importance (including trends, signals, risk factors, patterns in diseases, or increases in injuries). Such activities include those associated with providing timely situational awareness and priority setting during the course of an event or crisis, including natural or man-made disasters.*

Yes  No

8.4 Do the proposed activities involve collection and analysis of information, biospecimens, or records by or for a criminal justice agency or law enforcement order solely for criminal justice or criminal investigative purposes?

Yes  No

8.5 Do the proposed activities include authorized operational activities (as determined by each agency) in support of intelligence, homeland security missions?

Yes  No

**8.6 Do the proposed activities involve a *systematic approach*? A systematic investigation means this study is considered research. Please verify the above question to make sure you answered this is research above.**

**45 CFR 46.102(d): Research** - a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge.

Yes  No

**8.7 Is the intent of the proposed activities to *develop or contribute to generalizable (scholarly) knowledge*? If you answer yes to contribute to generalizable knowledge, this study is considered research. Please verify the above question to make sure you answered this is research above.**

Yes  No

**8.8 Do the activities involve obtaining information about *living individuals*?**

Yes  No

Do the activities involve face to face interaction with the individuals (i.e., prospective collection of data/specimens)?

Yes  No

**8.9 Do the activities involve obtaining individually identifiable and private information about a living individual(s) or identifiable biospecimens?**

Yes  No

## 9.0 Determining Level of Review Required

### 9.1 Does this study involve greater than minimal risk?

Minimal risk means the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in performance of routine physical or psychological examinations or tests.

Yes  No

### 9.2 Does this project involve living individuals or data (e.g., surveys/questionnaires, information, data, specimens, images) from living individuals?

Yes  No

### 9.3 Will you be using Epic, a patient chart, patient list, another medical record or any other Protected Health Information (PHI) to identify your participants, identify the charts to review or data to be extracted)?

Yes  No

### 9.4 Indicate below which elements of PHI you will be using, disclosing, or keeping in your research data set:

(PHI must include patient identifiers *and* health information, per HIPAA regulations. If your study does not involve patients, answer no. If you are using a full Social Security number the Beaumont Privacy Officer Kelly Partin will have to approve the rationale and you as the researcher are

Names

Yes  No

Address (including all geographic subdivisions smaller than a state, including street address, city, county, precinct, zip code, and their equivalent geo-codes, except for the in codes)

Yes  No

All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, and date of death. All ages over 89 and all year) indicative of age over 89, except that ages over 89 may be aggregated into a single category of "age 90 or older"

Yes  No

Telephone number

Yes  No

Fax number

Yes  No

E-mail address

Yes  No

Social security number

Yes  No

Medical record number

Yes  No

Health plan beneficiary number

Yes  No

Account number

Yes  No

Certificate/license number

Yes  No

Vehicle serial number

Yes  No

Universal Resource Locators (URLs)

Yes  No

Device Identifiers and serial numbers

Yes  No

Internet Protocol (IP) address numbers

Yes  No

Biometric indicators such as fingerprints or voiceprints

Yes  No

Full-face photographic images and any comparable images

Yes  No

Any other uniquely identifying number, characteristic, or code

Yes  No

**9.5 Will the research data collected and retained for this study include other identifying information? (This would include identifiable information. Examples include, but are not limited to, staff names, student education records subject to FERPA, physician NPI #'s or p**

Yes  No

**9.6 What type of data will be utilized in the study? Check all which apply.**

**If survey's are intended only for Employees/Staff/Physicians, HR approval will be required**

- Existing Data (Retrospective)
- Prospective Collection of Data from Chart Review
- Data collected from a research intervention/manipulation of environment or other research activities
- Prospective Questionnaire or Survey
- Face to face interaction

## 10.0 Research Review Categories - Exempt

**10.1 Please answer the following questions to guide you in selecting the correct Research Review Category (select all that apply):**

**Exempt Category 1:** Will this research be conducted in established or commonly accepted educational settings that specifically involves normal educational practices? This includes regular and special education instructional strategies, and research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management

Yes  No

**Exempt Category 2:** Will this research include interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or audio or video recording of behavior (including visual or auditory recording)?

OHRP Guidance- interpretation of "public behavior" as being behavior generally open to view by any member of a community and/or which would not involve an individual being observed (i.e., no reasonable expectation of privacy by those being observed), such as, at a park, in a mall, at a movie theater, etc. There are exceptions. Some activities in a public space e.g. a biology class might be conducted in a public park. Or consider educational activities in public spaces such as museums or libraries. Or there are classrooms that are audio or video recorded and made available to anyone e.g. public courses. Although in each of those cases there might be some debate whether those educational settings are public or only some subset. Participants in those examples would, I think, reasonably have different expectations of privacy than they would in a school.

Yes  No

**Exempt Category 3:** Does this study include only benign behavioral interventions in conjunction with the collection of information from an adult subject through verbal or written entry) or audiovisual recording with the subject's prospective agreement to the intervention and information collection?

For the purpose of this provision, benign behavioral interventions are brief in duration, harmless, painless, not physically invasive, not likely to have a significant adverse lasting effect, and the investigator has no reason to think the subjects will find the interventions offensive or embarrassing. Provided all such criteria are met, examples of such benign behavioral interventions include having the subjects play an online game, having them solve puzzles under various noise conditions, or having them decide how to allocate a nominal amount of received cash to someone else.

Yes  No

**Exempt Category 4:** Does this study involve Secondary research for which consent is not required?

Secondary research is defined as using identifiable private information or identifiable biospecimens originally obtained (prospectively or retrospectively) for non-research purposes and used in the current proposal. **This is typically epic/chart/data review studies.**

Yes  No

A - Are the identifiable private information or identifiable biospecimens publicly available?

Yes  No

B - Will the Information, which may include information about biospecimens, be recorded by the investigator in such a manner that the identity of the human subjects cannot be determined through identifiers linked to the subjects, the investigator does not contact the subjects, and the investigator will not re-identify subjects?

Yes  No

C - Does the research involve only information collection and analysis involving the investigator's use of identifiable health information when the information was originally collected for "operations", "research" or "public health activities and purposes" as those terms are defined in the HIPAA regulations?

Yes  No

D - Is the research conducted by, or on behalf of, a Federal department or agency using government-generated or government-collected information obtained for non-research purposes that generates identifiable private information that is or will be maintained on information technology subject to and in compliance with section 208(b) of the E-Government Act of 2002? If the identifiable private information collected, used, or generated as part of the activity will be maintained in systems of records subject to the Privacy Act of 1974, 5 U.S.C. 552a, and the information used in the research was collected subject to the Paperwork Reduction Act of 1995, 44 U.S.C. 3501 et seq.?

Yes  No

**Exempt Category 5:** Is this study a research and demonstration project conducted or supported by a Federal department or agency, or otherwise subject to the approval of the heads (or the approval of the heads of bureaus or other subordinate agencies that have been delegated authority to conduct the research and demonstration projects), and designed to improve, or otherwise examine public benefit or service programs, including procedures for obtaining benefits or services under those programs, possible changes in or alternative procedures, or possible changes in methods or levels of payment for benefits or services under those programs.

Such projects include, but are not limited to, internal studies by Federal employees, and studies under contracts or consulting arrangements, cooperative agreements, or grants, and studies that involve waivers of otherwise mandatory requirements using authorities such as sections 1115 and 1115A of the Social Security Act, as amended.

(i) Each Federal department or agency conducting or supporting the research and demonstration projects must establish, on a publicly accessible Federal Web site or in such other location as the department or agency head may determine, a list of the research and demonstration projects that the Federal department or agency conducts or supports under this provision. Each project must be published on this list prior to commencing the research involving human subjects.

Yes  No

**Exempt Category 6:** Does the study involve taste and food quality evaluation and consumer acceptance studies?

- (i) If wholesome foods without additives are consumed, or
- (ii) If a food is consumed that contains a food ingredient at or below the level and for a use found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.



Yes  No

## 11.0 Special Study Considerations

### 11.1 How will informed consent be obtained, if required?

- Full Informed Consent Document
- An Information Sheet - a Waiver of Consent Documentation is being requested (Full consent is given, but there is NO signature)
- A Survey/Questionnaire - a Waiver of Consent Documentation is being requested (Full consent, verbal or implied, is given but there is NO signature)
- A phone script - a Waiver of Consent Documentation is being requested (Verbal consent is given but there is NO signature)
- Study involves chart review or other activities that meet regulatory criteria for waiving the requirements to obtain informed consent – a Waiver of Consent is

If using a consent, information sheet, telephone script, etc. you will be required to attach these forms at the end of the application, just prior to submission.

### 11.3 Does either the clinical trial agreement or protocol require full compliance with International Conference on Harmonization (ICH) Good

You will be required to upload a CV for each key personnel listed on the study.

Yes  
 No

### 11.4 If this study is a multi-center trial will the Beaumont PI serve as the Lead Researcher?

**Lead or Coordinating Investigator:** A principal investigator assigned the responsibility for the coordination of investigators at different study [Guidance for Industry E6 Good Clinical Practice: Consolidated Guidance (GCP E6) 1.19]. The responsibilities of the coordinating requirements of the study. This includes all Sponsor Investigators with multi-center studies:

**Sponsor-Investigator:** An individual (usually the study Principal Investigator) who both initiates and conducts a clinical investigation, investigational product is administered or dispensed. The requirements applicable to a sponsor-investigator mean that sponsor invest both an investigator and a sponsor.

- Yes  
 No

11.5 Is this study involved in any way with the Department of Defense (DOD)?

**Examples could include DOD funding, use of DOD property, facilities or assets, collaborations with a component of the DOD or intent**

- Yes  No

## 12.0 Study Overview/Inclusion/Exclusion Criteria

12.1 All summaries must be written in language understandable to a non-medical person. The summary is intended for use by the IRB, lay technical language or medical terminology. If such language is required, the lay definition should immediately follow in parenthesis. in a concise summary format. For investigator-initiated studies, the study Protocol must be a separate document.

**Note: This application may be delayed or deferred if the Study Overview is incomplete, and/or the narrative description is not concise reader. Deferment by the IRB may cause a one-month or more delay in the review process.**

12.2 Describe study rationale, background and why you are conducting the study in lay terms. Include the following:

- Current or previously tried treatments to include rationale why this new treatment would be advantageous
- Background literature for treatment of this disease

- Include human and/or most relevant animal data

**Do not cut and paste**

Please copy and paste background from your approved Capstone proposal. Citations should be included (bottom of the text box).

**12.3 Describe the disease process under study in lay terms. Include the following:**

- Information on symptoms
- General disease progression
- Any severe complications from disease progression

**For studies looking at behaviors or educational practices, describe current practice, why this study is looking at those practices.**

You can also cut and paste this information from your proposal. Include citations if appropriate.

**12.4 What is your primary research question (primary objective)?** An IRB study needs to address a focused, clearly defined objective or hypothesis with the data and knowledge you wish to pull data for general outcome assessments, the project will be considered as a request to create a research database. Each subsequent question/objective requiring a query of the database.

**Objectives and/or Endpoints - Research objectives both general and specific (i.e., goal of study)**

1. **Primary (or general) objectives:**

**Specify the type of knowledge the study is expected to obtain. Clearly state what is to be described, determined, identified, or compared.**

2. **Secondary (or specific) objectives:**

**These break into component parts and flow from the primary objectives, and are an introductory view of the research design**

Please list your objectives here - fine to cut and paste from your approved Embark proposal.

**12.5 What other questions is your research designed to answer (most relevant/important secondary objectives)?**

Please list any other questions your research may answer.

**12.6 List inclusion criteria:**

**May be copied and pasted from the protocol**

Examples of inclusion criteria: Age range, dx info, inpatient Beaumont RO, women aged 18 and above

**12.7 List exclusion criteria:**

**May be copied and pasted from the protocol.**

inverse of inclusion

**12.8 Describe study methodology in lay terms. If the study is analyzing two groups or populations (i.e. retrospective data collection and a group surveyed after the research activity), describe the methodology to be used for each group or population.**

**Do not cut and paste**

Please walk the reviewer through each step of your project here, from start to finish. It's fine to copy and paste from your approved Embark proposal. This section should be very detailed. For any chart review, you must describe how you are obtaining a list of eligible participants. Will this be taken from an existing departmental database? If not, you will need help with from the Beaumont programmer. If the latter is the case, please indicate that Shirley Qu, from the Beaumont Research Institute, will be pulling the data.

**13.0 Chart Review/Data Extraction**

**13.1** How many charts/specimens will be *reviewed (screened)* for the study? This should include both chart/specimens which will be included as well as those that do not meet study criteria. The IRB recommends selecting a higher number to cover potential overages.

- 1-1000
- 1001-5000
- 5001 and above

## 14.0 Research Population

The IRB highly encourages the research team to consent/enroll all individuals utilizing a diverse population, with varying gender, race and ethnicities to encourage generalizability for the research study.

**14.1** Describe your participant population by age and gender: (e.g., female over 50 years of age):

Males or Females (Check all which apply)

- Male
- Female

Age Range (Check all which apply)

- Neonates (0-30 days)
- Children <18 years of age
- 18 and above
- Other specific age range - Explain below (i.e., breast cancer in pre-menopausal women in study population age 18-50)

Provide justification for age ranges selected:

Disease does not typically affect those under 18.

**14.2 Will study participants be excluded, other than minors, because of gender, race, age or ethnic background?**

Yes  No

Provide justification:

Breast cancer typically affects females more than males.

**14.3 How will participants/specimens/charts be recruited or identified?**

- Medical records
- Clinical Research Database (CRDB)
- Research Databases (other than CRDB)
- Other recorded information sources
- Direct person to person solicitation
- Advertisement/ Notice / Flyer
- Referral from other healthcare provider or support staff (e.g., physician office, laboratory)
- Other (specify):

**14.4 What methods will be utilized to ensure only the intended populations are enrolled?**

**It is important to have a method to confirm participants meet all inclusion criteria and none of the exclusion criteria. A screening check with an intervention with a participant. Verification of participant eligibility will be reviewed as part of any audit of the study. A chart**

*Check all that apply*

- Screening/Eligibility Checklist
- Other - Describe tool or method to assure that participants meet inclusion/exclusion criteria

If Other, explain:

Dr. Mentor has a list of patients who meet eligibility criteria. This list will be used to pull additional information from EPIC, as outlined in the variable list.

## 15.0 Vulnerable Participant Populations

### 15.1 Will Children (< 18 years of age) be enrolled/eligible to participate?

- Excluded from study
- May be incidentally enrolled
- Targeted population

If excluded from study, provide the rationale:

- This disease/illness does not typically affect children.
- Other

### 15.2 Will Pregnant Woman, Fetuses & Neonates be enrolled/eligible to participate?

- Excluded from study
- May be incidentally enrolled

- Targeted Population
- This is a chart review/survey with incidental inclusion of this population

**15.3 Will Economically or Educationally Disadvantaged individuals be enrolled/eligible to participate?**

- Excluded from study
- May be incidentally enrolled
- Targeted Population
- This study is not collecting data on the economic or educational status of the participants
- This is a chart review with incidental inclusion of this population

**15.4 Will Students/Trainees/Staff be enrolled/eligible to participate?**

- Excluded from study
- May be incidentally included
- Targeted Population
- The study is not collecting data related to students/trainees/staff or education of the participants
- This is a chart review with incidental inclusion of this population

**15.5 Will Decisionally Impaired individuals be enrolled/eligible to participate?**

**Decisionally Impaired is defined as: Having a psychiatric disorder (e.g., psychosis, neurosis, personality or behavior disorder), an organic brain disorder (e.g., dementia), a developmental disability (e.g., Down syndrome, autism), or a catastrophic event that affects cognitive functioning (e.g., trauma). A person's capacity for judgment and reasoning is temporarily or permanently diminished. Persons under the influence or dependent on drugs or alcohol are also considered decisionally impaired.**



degenerative diseases affecting the brain, or terminally or critically ill patients, may also be defined as decisionally impaired as their decision-making abilities are affected. *It is not permissible to exclude eligible participants on the basis of their cognitive abilities. The IRB may allow exclusion if*

- Excluded from study
- May be incidentally included
- Targeted Population
- Study not collecting information on cognitive status
- This is a chart review with incidental inclusion of this population

## 16.0 Data Collection & Storage, Research Records, Confidentiality and Privacy

16.1 Describe how research participants/specimens/data will be identified in research documents:

**(e.g., case report forms, data collection forms, questionnaires, adverse event/Unanticipated Problem reports)**

*Check all which apply*

- Name
- Medical record number
- Unique code/study ID
- Patient/Participant initials
- Other - Explain below:

A linking key will be created to provide extra security.

**16.3 The Institutional Review Board, Food and Drug Administration (FDA), Office for Human Research Protections (OHRP), Office of Civil Rights, and the authority to access study data.**

**Any data that is transmitted, shared, stored, or accessed outside of the United States (including for sponsored studies) will require a data use agreement in addition to a clinical trial or data use agreement approved by the Office of General Counsel and Research Administration.**

**The NSTR request form is available on the Beaumont Health intranet - Beaumont Home page > Applications > IT Service Desk > Submit a Request > right to IT Project Request > Menu on the left of screen > NSTR Request > Click on the hyperlink > scroll to the middle of the page to find the NSTR Request form. Contact Voss daniel.voss@beaumont.org with questions about completing this form.**

**Who other than those listed above and study key personnel will have access to the research data?**

***Check all that apply***

- None
- Funding Agency
- External IRB
- Cooperative Group
- External Collaborators
- Other- Explain below:

**16.4 Confidentiality = refers to agreement between the investigator and participant in how data will be managed.**

**Privacy = refers to persons and their interest in controlling the access of others to their information.**

**Describe how electronic data will be stored to minimize risk, preserve confidentiality of the research information collected and protect it from unauthorized access.**

***Check all which apply***

**\*All Beaumont Research data is required to be stored on a Beaumont network**

**Residents, Fellows & ALL Students & are required to store their data in SharePoint ONLY**

**SURVEY INSTRUCTIONS: Qualtrics can only be used if there is NO PHI. If there is PHI use REDCap**

On a password protected desktop computer

Yes  No

On a network server (Check NO if you are storing data in SharePoint)

Yes  No

On an encrypted laptop (Check NO if you are storing data in SharePoint)

Yes  No

In REDCap

You **must complete** the REDCap Project Request Form and attach to your submission if your PI/department would like to use REDCap for an upcoming research

**Download form: click orange Help button; scroll down to Forms; click link for REDCap Project Request Form)**

Please contact **donna.mcintyre@beaumont.org** for assistance

Yes  No

Beaumont SharePoint site

**Upon IRB approval, contact Derrick Dugeon (248) 551-3327 or [Derrick.Dugeon@beaumont.org](mailto:Derrick.Dugeon@beaumont.org) to request a SharePoint folder for your study**

Yes  No

Other electronic storage explain below:

Yes  No

**16.5 Describe where hard copy data (i.e. source document, consent form, checklists, data collection forms) will be stored to minimize risk, information collected and protect the privacy of participants:**

This study involves no hard copy data.

**16.6 *BH requires investigators to maintain research records, for approved human participants' protocols, in accordance with all federal and not limited to the HIPPA Privacy Rule, the Food and Drug Act and Medicare policy. The Beaumont Health research data must be kept within the Beaumont network only.***

**After the study is closed will the hard copies of the study records be stored in an off-site storage facility as designated by Beaumont**

Yes  No

**16.7 Do you agree that your data will be stored at Beaumont for a minimum of 11 years per HIPAA regulations and for studies enrolling people to be retained until the last participant turns 21 years of age?**

**If the study is sponsored, the Sponsor's approval is required prior to destruction of the records.**

Yes  No

## 17.0 Funding

Hospital policy requires all funds designated to support research utilizing Beaumont services or facilities, including patients identified through Beaumont, be forwarded to and disbursed by the Research Institute.

### 17.1 Funding Source:

Funding type	Name of funding source or N/A	Funding Status
Enter all sources of funding.  No Funding	N/A	<input checked="" type="radio"/> N/A - No Funding <input type="radio"/> Approved <input type="radio"/> Pending (study may not be confirmed)

### 17.2 Will research participants receive any reimbursement or compensation for participating in this study (money, gifts, vouchers, etc.)?

**Include cost information in the Informed Consent and Authorization Document.**

Yes  No

## 18.0 Research Waiver of Authorization

### 18.1

HIPAA Requirements to Review Patient Data without Patient Consent

The Department of Health and Human Services (HHS) and the Food and Drug Administration (FDA) have made provisions to the Health Insurance Portability and Accountability Act (HIPAA) that establishes the conditions under which protected health information (PHI) may be used. This form is required to be completed if there is a need to view patient information via charts, computer databases or other recorded information sources when recruiting/

**18.2 Describe your plan to protect the identifier from improper use and disclosure:**

- NA - No identifiers
- Password protected computer/network
- REDCap Database
- Secured/locked department office
- SharePoint
- Sponsor Database
- Other- Describe:

**18.3 Who will have access to patient identifiers?**

Check all that apply:

- NA - No identifiers
- Key Personnel listed on study roster
- Sponsor
- Federal Agencies
- Other

**18.4 Describing your plan to destroy the identifier at the earliest opportunity.**

**All lists generated with patient identifiers, (e.g. name, medical record number) used to locate potential participants, must be destroyed**

Describe plan to destroy list with patient identifiers. Check all that apply:

- NA - No identifiers
- Shredding of paper documents
- Deletion of electronic data
- N/A - Identifiers will not be destroyed as required by law (Describe law/regulation restricting destruction of identifiers in box below)
- N/A - Identifiers will not be destroyed due to health or research reasons (Describe your justification in box below)

**18.5 The list of identifiers will be destroyed:**

Check all that apply:

- NA - No identifiers
- Upon manuscript publication
- Study completion
- At the determination of the sponsor/investigator
- At the time of consent
- When deemed ineligible
- Upon declining participation
- N/A - Identifiers will not be destroyed (see above justification)

**18.6 Could this research practicably be conducted without this waiver of authorization?**

Yes  No

If no, why not?

As this research consists of retrospective records review, it would not be feasible nor practical to contact participants for their consent.

**18.7 Could this research practicably be conducted without access to and use of Protected Health Information?**

Yes  No

If no, why not?

In order to ensure accuracy of data collected, it is necessary to retrieve name and MRN from EPIC.