Policy on Unanticipated Problems Involving Risks to Subjects or Others

Effective date: 9/20/2019

I. Background

The Office for Human Research Protections within the Department of Health and Human Services requires all research funded by any Common Rule department or agency (see https://www.hhs.gov/about/agencies/hhs-agencies-and-offices/index.html and https://www.hhs.gov/ohrp/regulations-and-policy/regulations/common-rule/index.html) to report unanticipated problems involving risks to subjects or others to the funding agency. If a research event potentially meets the definition of an unanticipated problem involving risks to subjects or others, researchers must promptly report to the IRB as outlined in this policy. The IRB is charged with reviewing the problem to determine any required changes to the research or corrective actions to protect human subjects or others.

II. Definitions

a. Adverse event: Any untoward or unfavorable medical occurrence in a human subject, including any abnormal sign (for example, abnormal physical exam or laboratory finding), symptom, or disease, temporally associated with the subject’s participation in the research, whether or not considered related to the subject’s participation in the research. Adverse events encompass both physical and psychological harms. They occur most commonly in the context of biomedical research, although on occasion, they can occur in the context of social and behavioral research.

b. Unanticipated problem involving risks to subjects or others: An incident, experience, or outcome that meets all of the following criteria:

- Is unexpected (in terms of nature, severity or frequency) given (a) the research procedures that are described in the protocol-related documents, such as the IRB- approved research protocol and informed consent document; and (b) the characteristics of the subject population being studied;
- Is related or possibly related to participation in the research (possibly related means there is a reasonable possibility that the incident, experience, or outcome may have been caused by the procedures involved in the research); and
- Suggests that the research places subjects or others at a greater risk of harm (including physical, psychological, economic, or social harm) than was previously known or recognized.
III. Determining when an event is an unanticipated problem involving risks to subjects or others
An adverse event, problem, or incident must be reported to the IRB when it potentially meets the definition of an unanticipated problem involving risks to subjects or others as defined in this policy. Some examples include but are not limited to: a stolen laptop with identifiable human research data, other breaches of confidentiality or privacy, injury from device used in research that was not listed on the informed consent document or was more severe in nature, and complaints from subjects not resolved by research team. If the event does not meet the definition of an unanticipated problem, the researchers may still be required to report adverse events to their sponsors, coordinating centers, data safety monitoring boards, etc.

IV. Reporting Requirements and Procedures
a. Researchers: If a researcher determines that an unanticipated problem involving risks to subjects or others occurred, an Event Report form must be completed and submitted promptly (within 1 week of event discovery) to the Office of Research Compliance Administration (ORCA) for IRB review. The form will provide a summary of the problem, any response to date, any real or anticipated impact on subjects or others, and any steps taken or planned to prevent recurrence, if applicable.

b. IRB and ORCA: Once reviewed, if the IRB determines the event is an unanticipated problem involving risks to subjects or others, the ORCA Director or their designee will report this to the Institutional Official (IO), the PI, and the PI’s Department Chair, the sponsor as required, and OHRP for research funded by any Common Rule department or agency (see https://www.hhs.gov/about/agencies/hhs-agencies-and-offices/index.html and https://www.hhs.gov/ohrp/regulations-and-policy/regulations/common-rule/index.html). The ORCA Director or their designee will report within 30 days of its determination.

V. IRB Review and Actions
ORCA forwards the Event Report form to the Chair. The Chair or the Chair’s designee will review the form to determine whether the incident potentially meets the definition of an unanticipated problem involving risks to subjects or others. If not, the Chair/designee may either require changes to the research or determine that no further action is necessary. If so, the Chair/designee will forward the issue to the full Board and the convened IRB will determine whether the incident constitutes an unanticipated problem involving risks to subjects or others. The convened IRB, or IO, may determine that the study needs to be amended (e.g.,
additional monitoring, change in procedures, additional information in consent and risks section), suspended (e.g., suspend new enrollment, procedures, what to do regarding already enrolled subjects, etc.) or terminated, based upon risks to subjects or others. See Policy on Suspensions and Terminations.

VI. References
a. OHRP Guidance on Reviewing and Reporting Unanticipated Problems Involving Risks to Subjects or Others and Adverse Events
b. 45 CFR 46.103(a); 46.103(b)(5); 46.109(e); 46.111(a)(1), (a)(2), and (a)(6); 46.113
c. 21 CFR 56.113 and 21 CFR 812.150