

October 22, 2009

To Whom It May Concern:

The Dana-Farber Cancer Institute (DFCI) has an approved Federal Wide Assurance (FWA-FWA00001121 on file with the U.S. Department of Health and Human Services (DHHS), Office of Human Research Protections (OHRP). This FWA expires on September 15, 2012.

The following DFCI Institutional Review Boards (IRBs) are registered with OHRP and are designated in the DFCI FWA to conduct reviews of research involving human subjects for the Dana-Farber Cancer Institute: IRB00000052; IRB00000753; IRB00001186; IRB00003340; IRB00005504; and IRB00006224. The DFCI IRB Organization number is IORG0000035 and expires on October 5, 2012. The DFCI IRBs are also registered in compliance with the Food and Drug Administration (FDA) regulations at 21 CFR Part 56. The DFCI IRBs are the designated IRBs of record for all oncology protocols for institutions that comprise the Dana-Farber/Harvard Cancer Center (DF/HCC) consortium, including Beth Israel Deaconess Medical Center, Brigham and Women's Hospital, Children's Hospital Boston, Dana-Farber Cancer Institute, and Massachusetts General Hospital. Additionally, the DFCI IRBs serve as the IRBs of record for several affiliated institutions pursuant to cooperative agreements.

All research involving human subjects reviewed by the DFCI IRBs is guided by the ethical principles in *The Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects of Research* of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research. The DFCI IRBs are duly constituted, fulfilling Federal requirements for membership; have written procedures for initial and continuing review for human subjects research; prepare written minutes of convened meetings; and retain records pertaining to the review and approval process all in compliance with the requirements for IRBs defined in DHHS 45 Code of Federal Regulations (CFR) Parts 46 and 164, Food and Drug Administration (FDA) 21 CFR Parts 50 and 56, and Guidelines of the International Conference on Harmonization relating to Good Clinical Practices (GCPs) to the extent required by the FDA.

The DFCI IRBs do not post membership rosters or release names of IRB members. Any IRB member who is an investigator, co-investigator or has any other conflict of interest with a protocol under review by the DFCI IRBs will not participate in the deliberation or vote of that protocol although he or she may be called upon to answer questions during the review.

The DFCI IRBs do not require the IRB Chairs or any other member of the IRB to sign approval memoranda. There is no regulatory requirement for such signatures. Final IRB approval occurs when the IRB votes to approve a research protocol and that approval is reflected in the minutes. With respect to a conditional approval, an IRB member signs off on a verification form that confirms that the investigator has met all of the IRB conditions.

Once that verification form has been signed, approval memoranda are generated by the staff of the Office for Human Research Studies (OHRS), which is the office charged with managing scientific and IRB review of oncology protocols for DF/HCC. (Please note: OHRS was formerly the Office for the Protection of Research Subjects. The change in name occurred in September of 2008.) The DFCI IRB approval memoranda serve to document IRB approval of the entire submission including, but not limited to, the protocol, the informed consent document, and, if applicable, the Investigator Brochure.

Research protocols obtain SRC approval and IRB approval. No subject may be registered to a trial until it is 'activated.' This means that all steps are in place to ensure that once a subject is enrolled, research procedures may commence immediately. IRB approved consent documents are stamped "not for subject use" until the research is "activated."

Re-consenting of subjects is required when there is a new risk or event that impacts the risk/benefit ratio involved in participation in the research. Re-consenting is not required to inform of editorial or administrative changes, or, at the time of continuing review unless this is because of newly discovered risks or other critical information. Re-consenting is required where (1) the investigator proposes to re-consent subjects and the IRB confirms this; or (2) the IRB specifically requires re-consenting. While there may be situations in which re-consent occurs because of a sponsor requirement, the re-consent will not be viewed as an IRB requirement unless the IRB specifically so determines. Additionally, the IRB may require that new information be conveyed to subjects via written correspondence or verbally, rather than via a revised informed consent document.

Generally, the DFCI IRBs review events arising during the course of the research that may require a re-consenting of subjects. The DFCI IRB will determine the appropriate method of re-consenting based upon each individual situation. The DFCI IRB will take into account an investigator or sponsor determination to re-consent a subject. The DFCI IRB will also consider whether a new signed consent document is required or whether verbal re-consent with accompanying documentation in the medical or study record will be satisfactory given the circumstances.

The DFCI IRBs do not accept submissions from investigators of IND/IDE safety reports from outside sponsors detailing adverse events that have occurred at sites other than the DF/HCC unless the report is of an incident that is: (1) serious or life-threatening; (2) unexpected; (3) related to the research intervention; and, (4) has implications for the conduct of the study. If the incident falls within the guidelines above, investigators are required to submit the report as an amendment.

The DFCI IRBs do not use version numbers on informed consent documents, but electronically stamp the document with the last IRB approval date and expiration date. When the institution conducting the research is ready to open the study, the informed consent form is electronically stamped with the date it is posted for use.

If you require additional information please contact our office at the number listed above.

Sincerely,



Michele Russell-Einhorn, JD
Senior Director