SOP 2.6.1 **Continuing Review**

General Description:

Continuing Reviews are intended to periodically reassess research projects to assure that, among other things, risks to subjects are being minimized and are still reasonable in relation to anticipated benefits (if any) to the subjects.

The IRB must conduct continuing review of certain covered research projects at intervals appropriate to the degree of risk while data is being collected, but not less often than once a year (45 CFR 46.109(e)). When required, continuing review must take place at a convened meeting at which a majority of the IRB members are present, including at least one member whose primary concerns are in nonscientific areas, unless the research qualifies for review under an expedited review procedure (45 CFR 46.108(b)). Generally, the IRB requires annual continuing review of projects that required initial review by the full board, projects involving prisoners as participants, projects where the full research plan has not been developed at the time of initial submission, projects that are FDA regulated, and other projects on a case-by-case basis.

It is ultimately the principal investigator's responsibility to track the approval periods and ensure that IRB approval does not lapse. Investigators are responsible for fulfilling requirements associated with continuing review in time for the IRB to carry out continuing review prior to the expiration date of the current IRB approval. If approval of a continuing review form is not received and approved by the IRB prior to the expiration date of a study, then all research activities must stop. There is no grace period extending the conduct of the research beyond the expiration date of the approval period. Enrollment of new subjects may not occur and interventions, interactions, or data analysis involving previously accrued subjects must cease, unless the IRB determines that it is in the best interests of individual subjects to continue participation. A request to continue research interventions or interactions with previously accrued subjects after the expiration date must be submitted in writing to the IRB, and it must include a list of the affected subjects and an explanation of why it is in their best interests to continue participation in the research interventions or activities.

The IRB may accept and process a continuing review/closure form submitted within one month of the expiration date of the study. A new application and supporting documents must be submitted by the investigator after one month of the expiration date, unless previous arrangements have been made with the IRB staff.

Continuing review uses the same procedures, applies the same criteria for approval, and involves the same possible IRB actions as reviews of initial applications or modifications.

Procedures:

1. **Courtesy Reminders to Investigators of pending expiration of approval.**
    a. Principal investigators are responsible for maintaining their IRB approval and for submitting a continuation application to the IRB. As a courtesy and service to the researchers, email notifications will be sent to the research team 60 days and 30 days before the protocol expiration date, requesting that a Continuing Review be completed and submitted. Additionally, researchers will receive a notification of expiration as an expiration date passes.

2. **Submission of Continuing Review/Closure Form**. Investigators provide a completed Continuing Review/Closure form through IRBNet at least 3 weeks prior to approval expiration to ensure IRB review will occur prior to the expiration date. The following information must be submitted within or in addition to the Continuing Review/Closure Form:
    a. A project summary or progress report including:
        i. The number of subjects accrued since last review and a total to date
        ii. A brief summary of any amendments to the research approved by the IRB since the IRB's initial review or the last continuing review
        iii. Any new or relevant information since the last IRB review, including information about risks associated with the research
        iv. A summary of any unanticipated problems and adverse events since the last IRB review
        v. A summary of any withdrawal of subjects from the research and reasons for withdrawal since last review
        vi. A summary of the complaints about the research from the subjects or others since last review
    b. Investigators must verify that the IRB has on file (electronic file via IRBNet) the latest version of the IRB approved protocol and any additional documents as appropriate. At each continuing review, investigators must submit clean copies of recruitment and consent documents.
    c. Any changes in the investigator's situation, qualifications or affiliations.
    d. If the investigators wish to request IRB review of proposed changes to the study procedures at this time, an amendment form and additional materials may be submitted at the same time as the continuing review information through IRBNet (see SOP 2.6.4 Modifications/Amendments)
    e. If the investigator does not wish to continue the study past the expiration date, then he or she should still submit the Continuing Review but should select the "closure" option on the form. (See SOP 2.6.2 Project Completion/Project Close-Out Procedures).

3. **Pre-review procedures:** Prior to the continuing review, IRB staff will perform a preliminary review, verifying all appropriate information is included in the continuing review package. Staff will identify and obtain clarification about any significant issues about the research before review (including over-enrollment, withdrawals, or problems).

4. **Assignment to Review.** GMU IRB staff members will schedule review by a convened IRB meeting or, if the study qualifies, by an expedited reviewer. The same IRB (or expedited reviewer) that performed the initial review of a study will generally perform all subsequent continuing reviews.

5. **IRB Review.** The IRB will determine if the criteria for initial approval of research studies are still satisfied. The IRB will determine that the following are satisfied:
    a. Risk to subjects are minimized;
    b. Risks to subjects are reasonable in relation to anticipated benefits;
    c. Selection of subjects is equitable;
    d. Informed consent will be sought from each prospective subject or the subject's Legally Authorized Representative;
    e. When appropriate, the research plan makes adequate provision for monitoring the data collected to ensure the safety of subjects;
    f. When appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of data;

g. Appropriate safeguards are included to protect subjects likely to be vulnerable to coercion or undue influence; and
h. When the research involves pregnant women, fetuses, neonates, prisoners, or children, the research satisfies the additional requirements for IRB approval.

6. **IRB Determination**
    a. Under HHS regulations at 45 CFR 46.109(a), the IRB can take any of the following actions:
        i. Approve the research study either (a) as submitted without any conditions, or (b) with conditions;
        ii. Require modifications to secure approval and defer or table the research study for further review at a future date after the required modifications are submitted by the investigator; or
        iii. Disapprove the research study.
    b. Duration of approval period after continuing review. The IRB determines whether the project requires review more often than annually. The IRB may also specify a subject enrollment number as a threshold for determining when continuing review is to occur (for example, after 5 subjects have experienced the study intervention or after 6 months, whichever comes first).

7. IRB Communication
    a. The IRB must notify the investigator and the institution in writing of its decision to approve or disapprove the continuation of research, or of modifications required to secure IRB approval of the research (45 CFR 46.103(b)(4) and 46.109(d)).
    b. For research projects that are approved to continue, the IRB's notification to the investigator will clearly state the period of time for which the project is approved, any conditions of the IRB's approval, and the date by which the next continuing review must occur (46.109(d))

8. IRB Records
    a. A copy of all correspondence concerning continuing review will be kept in the electronic IRB file for the study.
    b. The minutes of the IRB meeting will document the following for projects reviewed at a convened meeting:
        i. Separate deliberations, actions, and votes for each protocol undergoing continuing review;
        ii. The vote on all IRB actions including the number of members voting for, against, and abstaining, recorded in a manner that documents the continued existence of a quorum.
        iii. Conditions of approval or reasons for deferral for each action taken by the IRB.

9. Projects not requiring continuing review
    a. If the IRB determines that a protocol is no more than minimal risk to participants and the Board does not document a specific justification for requiring continuing review, research that is eligible for expedited review will not generally require annual continuing review (45 CFR 46.109 (f)).
    b. Projects in which data collection has been completed and the remaining activities are limited to data analysis will not require continuing review.
    c. For projects where continuing review is not required, no expiration date will appear in the approval letter.
    d. Automated email notifications will be sent to the research team annually reminding them that any adverse events and changes to the project should be submitted for IRB review. The email notification will also ask whether or not the project has been completed.

Investigators should submit the appropriate forms to report events or request any changes to the research as needed. The continuing review form should be submitted to close projects when appropriate. Otherwise, investigators are not required to act on the reminder messages.

References

45 CFR 46.108(b)
45 CFR 46.109(e);
45 CFR 46.109(d);
45 CFR 46.109(a);
45 CFR 46.109 (f)
21 CFR 56.109(f)
21 CFR 56.108(a)(2)
OHRP, "Guidance on IRB Continuing Review of Research", November 10, 2010.
FDA, "Guidance for IRBs, Clinical Investigators, and Sponsors: IRB Continuing Review after Clinical Investigation Approval; February 2012.

Related Forms, Guidance, and SOPs:

- 2.5.1 Full Board Review
- 2.5.2 Expedited and exempt review
- 2.6.2 Project Completion/ Close-out Procedures
- 2.6.5 Adverse Event Reporting Policy

Responsibility:

Execution of SOP:
Principal Investigator
Study Team Members
IRB Staff
IRB

Approval and Version History:

Please contact irb@gmu.edu if you have any questions about this policy or the version and approval history.

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Approved By	Title and Division	Date Approved
Aurali Dade	Associate Vice President, Research Development, Integrity and Assurance	January 21, 2019
Laurie Meamber	IRB Chairperson	January 21, 2019