

CIP Body of Knowledge/Content Outline

I. Foundations and Concepts of IRB Practice

25%

- A. Historical Background
- B. Research Ethics
 - 1. Belmont Report
 - a. Respect for Persons
 - b. Beneficence
 - c. Justice
 - 2. International Codes/Standards
 - a. Nuremberg Code
 - b. Declaration of Helsinki
 - c. Council for International Organizations of Medical Sciences
 - d. International Conference on Harmonisation
 - 3. Professional Codes
 - a. CIP Code of Ethics
 - b. Professional Association Codes
 - 4. Conflict of Interest
 - a. IRB Members and Staff
 - b. Investigators and Key Personnel
 - c. Institutional
- C. Research Design Issues
 - 1. Types of Study Designs
 - 2. Minimizing Risks
 - 3. Study Monitoring (DMC, Plans, etc.)
 - 4. Sample Size/Statistics
 - 5. Privacy, Confidentiality, and Data Security
 - 6. Deception
- D. Regulatory Application
 - 1. HHS Regulations
 - a. Applicability
 - b. Exemptions
 - 2. Common Rule
 - a. Applicability
 - b. Agency Differences (e.g., DOD, DoEd, DOJ)
 - c. Exemptions
 - 3. FDA Regulations (Human Subjects)
 - a. Applicability
 - b. Exemptions
 - 4. FDA Regulations (Drugs/Biologics/Devices)
 - a. Applicability

- b. Exemptions
 - 5. State/Local Regulation
 - 6. Regulatory Audits
 - a. FDA Bioresearch Monitoring Program
 - b. OHRP Monitoring and Site Visits
 - c. Sponsor/Cooperative Group Monitoring
 - 7. Health Insurance Portability and Accountability Act (HIPAA)
- E. Definitions
 - 1. Research
 - 2. Human Subjects
 - 3. Minimal Risk
 - 4. Vulnerable Populations
 - 5. Engaged in Research

II. Organizational and Personnel Knowledge

12%

- A. IRB Committee Organization
 - 1. Authority
 - a. Approve/Disapprove/Modify
 - b. Suspend/Terminate
 - 2. Membership Requirements
 - 3. Quorum Requirements
 - 4. Reporting Lines
 - 5. Leadership Issues
- B. IRB Office Organization
 - 1. Staff Responsibilities and Authorities
 - 2. Reporting Lines
 - 3. Management (Personnel and Resources)
- C. Institutional Considerations
 - 1. Scientific Review
 - 2. Grants and Contracts Review
 - 3. Other Committee Review (RDRC, Biosafety)
 - 4. Institutional Review
 - 5. Institutional Responsibilities
 - 6. Research Misconduct
 - 7. Reliance Agreements and Central Review
- D. Educational Program Design/Implementation
 - 1. Education Programs for IRB Staff
 - 2. Education Programs for IRB Members
 - 3. Education Programs for Investigators/Research Sites
 - 4. Education Programs for Institutional Officials

III. IRB Functions and Operations

45%

- A. IRB Review
 - 1. Levels of Review
 - a. Exempt Procedures

- b. Expedited Review
 - c. Convened Meeting Review
 - 2. Types of Review
 - a. Initial Review
 - b. Continuing Review
 - c. Amendment Review
 - d. Adverse Event/Unanticipated Problems Review
 - e. Final Reports/Study Closure
 - 3. Criteria for Approval of Research
 - a. Risk Determination and Minimization of Risks
 - 1. Minimal/Minor Increase/Greater than Minimal
 - 2. Significant/Non-Significant Risk Devices
 - 3. Procedure Review
 - b. Risk-Benefit Analysis
 - c. Equitable Subject Selection
 - 1. Inclusion/Exclusion of Children, Minorities, and Women
 - 2. Inclusion/Exclusion of Other Vulnerable Populations
 - d. Informed Consent
 - 1. General Conditions
 - 2. Elements
 - 3. Waiver of Consent
 - 4. Documentation
 - 5. Waiver of Documentation
 - 6. HIPAA
 - e. Monitoring Plans
 - f. Protection of Privacy and Maintenance of Confidentiality
 - 1. Common Rule
 - 2. HIPAA
 - 3. Certificates of Confidentiality
 - 4. FERPA
 - 5. GINA/GWAS
 - g. Additional Safeguards for Vulnerable Subjects
 - h. Investigator and Site Qualifications
 - 4. Emergency Uses
 - 5. Treatment Uses
 - 6. Subject Recruitment
 - a. Advertisements
 - b. Inclusion/Exclusion Criteria
 - c. Incentives
 - 7. Special Regulatory Requirements
 - a. Fetuses, Pregnant Women, IVF
 - b. Prisoners
 - c. Children

- d. Emergency-Setting Research
 - e. School Research (PPRA)
 - 8. Human Subject Private Information
 - a. Databases
 - b. Document Repositories/Archives
 - c. Record Repositories/Collections
 - d. Specimen/Tissue Banks
 - e. Data Security
 - 9. International Research
 - B. IRB Staff Review
 - 1. Staff Pre-Screening
 - 2. Post-Meeting Communications/Review
 - 3. Auditing
 - a. IRB Office
 - b. Investigators/Research Sites
 - c. Program Assessment
 - C. Post-Approval Monitoring
 - 1. Consent Process
 - 2. Research
 - 3. Protocol Deviations
- IV. **Records and Reports** 18%
 - A. Policies, Procedures, and Membership
 - 1. IRB Membership Records
 - 2. IRB Policies
 - 3. IRB Procedures and Forms
 - B. Assurances and Registration
 - 1. Federalwide Assurance of Protection for Human Subjects (FWA)
 - 2. IRB Registration
 - C. Regulatory Reports (Internal/External)
 - 1. Noncompliance
 - 2. Terminations/Suspensions
 - 3. Subjects' Rights and Welfare (Injury, Adverse Events, and Unanticipated Problems)
 - D. Audit Reports, Monitoring, and Other Communications
 - 1. Internal Procedure Audits
 - 2. Study Monitoring Reports
 - 3. External Audits (OHRP, FDA)
 - 4. Accreditation
 - 5. Clinical Trial Registries
 - E. Meeting Minutes
 - 1. Attendance, Quorum, Voting
 - 2. Discussion and Findings
 - 3. Reports to the IRB
 - F. Document and File Maintenance

1. Study Files
 2. IRB Management Files
 3. Regulatory Documents
- G. Archiving Requirements
1. IRB Records
 2. Investigator Records
 3. HIPAA Records
- H. IRB Information Management
1. File Tracking
 2. Data Collection
- I. Training Documentation
1. IRB Members and Staff
 2. Investigators and Other Key Personnel
 3. Institutional Officials

CIP
CERTIFIED IRB
PROFESSIONAL