



# MULTI-REGIONAL CLINICAL TRIALS

THE MRCT CENTER of  
BRIGHAM AND WOMEN'S HOSPITAL  
and HARVARD

## PRIM&R – Ethics of Data Access

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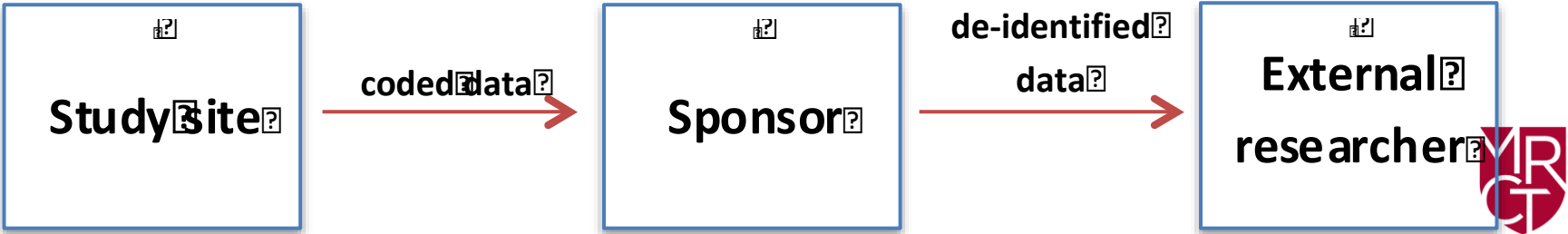
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## Objectives of our Multi-stakeholder Work:

- Discuss the risk of re-identification and determine protective mechanisms
  1. Achieve clear definitions of identifiable data, anonymized data, anonymous data, de-identified data, and re-identified data.
- Provide guidance in two areas:
  2. Retrospective consent: Interpret the limitations imposed by language in existing informed consent forms (ICF's) upon data-sharing.
    - *Silent, narrow sharing, broad sharing or conflicting language found in existing forms*
  3. Prospective consent: Develop ICF language for patient-level data-sharing acceptable to IRBs and patients groups.

# Suggested Definitions for ICFs - Definitions

Term	Definitions
<u>personally identifiable data</u>	information that directly or indirectly identifies you (e.g. name, SSN, address, telephone number, email address)
<u>coded data</u>	study participant data and samples for which a code is given to replace a person's name or other specific information.
<u>de-identified data</u>	data modified to remove the presence of personally identifying information
<u>your data</u>	your personal and medical data collected during the study, which may be coded or de-identified



# Proposed ICF Language for Data Sharing

## Key Sections

- What information about me will be used in the study?
- Who may see, use and share your personal and health information?
- How will my information be used?
- How may my data be used for additional research?
- What other information is shared?
- Do I have to participate?
- Can I change my mind?

NOTE: sharing is linked to participation in the study and the form takes an “inform” approach

