



Other Approvals Required

The University of Arizona has requirements for prior approvals from other administrative offices, other compliance units, or other organizations prior to submitting materials to the IRB for review. Listed below are the required approvals that must be submitted in eIRB for review, as applicable. If the approvals are not received with the submission, the HSPP will return the submission to the research team until the approvals are obtained. **It is the responsibility of the Principal Investigator to ensure that all required approvals by the organization are obtained prior to beginning the research.**

Banner Health

Approval from Banner Health is required before a researcher may access patients, records, specimens, or any Banner Health facility. This approval is noted as 'feasibility review approval' and is obtained by submission of the research project to the [University of Arizona Health Sciences \(UAHS\) Research Administration Portal \(RAP\)](#).

For non-funded research: UAHS will provide the research team with feasibility review approval. A copy of this approval must be uploaded to eIRB **before** the application is submitted in eIRB. This approval is required before the IRB will begin its review.

For funded research: After the Coverage Analysis (CA) has been approved, UAHS will provide feasibility review approval, which will include the UAR Institutional Proposal (IP) number. **Prior to submitting the application in eIRB:**

1. Researchers **must** link their funding in eIRB using the IP number provided by UAHS; and
2. Upload a copy of the feasibility review approval to eIRB. This approval is required before the IRB will begin its review.

Office of Outside Interests (OROI) Review

All individuals who meet the definition of "investigator" conducting research on behalf of the University of Arizona are required to comply with the "Policy on Investigator Conflict of Interest in Research" including required Conflict of Interest training and certification of the "Disclosure of Significant Financial Interests". For questions, please contact the COI Program at 520-626-6406, coi@arizona.edu, or the OROI Program webpage at <https://research.arizona.edu/compliance/office-responsible-outside-interests>.

Export Control Review

Some projects may fall under the jurisdiction of federal export control laws and regulations and require an export control review for possible issues. The export control regulations potentially restrict the overseas shipping, transmission, or transfer of certain categories of information, technologies, software, and items to foreign persons outside the U.S. or inside the U.S. (a "deemed export"). These laws and regulations also affect projects and interaction with foreign sponsors or entities, attending conferences abroad, and taking university property, including data and other information, when traveling outside the U.S. Please visit the Export Control webpage at <https://research.arizona.edu/compliance/export-control-program>.



Other Approvals Required

Research, Laboratory, Safety, Services Radiation (RLSS) Approvals

Research and clinical PIs involved with the uses of licensed radioactive materials (RAM) or certain ionizing (i.e., bone scan, bone mineral analyzers - DEXA, DXA, QCT, radioactive source - CT, PET, MUGA, mammogram, X-Ray/radiography, radiotherapy machines, fluroscopy, radiopharmaceuticals/radioisotope/radionuclide) and non-ionizing (i.e., lasers, radiofrequency) radiation generating devices must apply to establish an RLSS Radiation Approval prior to beginning any work with such material or devices. Radiation Approvals are granted to PIs by one of the following Radiation Safety Committees: the University Radiation Safety Committee, the Medical Radiation Safety Committee and the Non-Ionizing Radiation Safety Committee. Uses of facilities containing radioactive material recognized by the Nuclear Regulatory Commission as being in “Quantities of Concern” require potential users to undergo fingerprinting and a background check in advance of unescorted access. A copy of the RLSS Radiation Approval must be uploaded to eIRB before the IRB will begin its review.

Note: For research conducted at Banner-University Medical Center Phoenix, radiation safety and biosafety review are not conducted by RLSS. Instead, review is conducted by Banner Health’s radiation or biosafety committees.

RLSS Biosafety Approvals

Research and clinical PIs involved with the use of regulated biological materials must apply to establish an RLSS Biosafety Approval prior to beginning any work with such material. Biosafety Approvals are granted to PIs by the Institutional Biosafety Committee (IBC). Uses of facilities authorized for biohazardous material identified by the United States Center for Disease Control as “Select Agents and Toxins” require users to undergo fingerprinting and a background check in advance of unescorted access. A copy of the RLSS Biosafety Approval must be uploaded to eIRB before the IRB will begin its review.

RLSS Chemical Safety Approvals

Research and clinical PIs involved with the use of hazardous chemicals on a laboratory scale must apply to establish an RLSS Chemical Safety Approval prior to beginning any work with such material. Chemical Safety Approvals are granted to PIs by the University Chemical Hygiene Officer. The possession of, regulated explosives, controlled substances, highly toxic or corrosive compressed gasses require the satisfactory completion of a chemical safety audit prior to delivery and/or use. A copy of the RLSS Chemical Safety Approval must be uploaded to eIRB before the IRB will begin its review.

Site Authorization

When research activities will take place at an external site (e.g., school district, non-profit, or other collaborating facility), approval from that site is required before research can begin. An approval, or other documentation of ongoing correspondence regarding the research activity, should suffice. Final IRB approval may be contingent upon the local site approval. A copy of the Site Authorization approval must be uploaded to eIRB before the IRB will begin its review.

Advisor/Co-I Review

When the proposed Principal Investigator (PI) does not meet the [University of Arizona PI Eligibility](#) policy, a Co-I, or Advisor, is required. The designated Co-I/advisor/mentor must be listed on the Local



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Study Team Members page in eIRB as both an “Advisor” **and** “Co-Principal Investigator.” Attestation from the Advisor/Co-I is required upon eIRB submission. Attestations will be accepted in one of the following formats:

- The Advisor/Co-I logs a comment in the study’s workspace in eIRB documenting their approval.
- An email from the Advisor/Co-I is uploaded in eIRB documenting their approval. Or
- The Advisor/Co-I signs the *Advisor/Co-I Attestation for Human Subjects Research* form and uploads to eIRB.

The Advisor/Co-I certifies to oversee and monitor the conduct of the research by communicating regularly with the PI; assist with the resolution of any problems or concerns encountered during the research; and assure that the UA IRB is notified in the event of an adverse event or unanticipated problem.

Scientific/Scholarly Review

To justify the inclusion of human subjects in research, and to assess the balance between any risks that may be imposed upon human subjects, an assessment is required to evaluate the scientific question and appropriateness of the methods planned to answer the scientific question. The role of the IRB is not to assess science unless the project is so poorly designed that it affects risks or benefits.

Scientific assessment is required for all human research. The actual protocol being submitted to the IRB must have been reviewed in its current form. **One** of the following Scientific/Scholarly Reviews is required upon eIRB submission:

- 1. Nationally based, federally funded organization (i.e., NIH, NSF) subject to full peer review**
 - a. Peer review of a grant that describes a clinical trial in general terms **does not** satisfy this criterion.
 - b. Industry-sponsored clinical trials designed by the sponsor with or without external consultants **do not** satisfy this criterion for independent peer-review.
 - c. No signature required for eIRB submission**
- 2. Nationally based, non-federally funded organization (i.e., March of Dimes, American Academy of Pediatrics) subject to peer review**
 - a. Peer review of a grant that describes a clinical trial in general terms **does not** satisfy this criterion.
 - b. Industry-sponsored clinical trials designed by the sponsor with or without external consultants **do not** satisfy this criterion for independent peer-review.
 - c. No signature required for eIRB submission**
- 3. Locally constituted peer review**
 - a. UACC Scientific Review Committee (SRC): All cancer-related projects must have approval by the SRC, regardless of the investigator’s home department.
 - b. College/department peer review (Advisors may sign on behalf of students they mentor regarding scientific review)
 - c. Signature required for eIRB submission unless UACC SRC approval applies**



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Attestation for locally constituted peer review will be accepted in the following formats:

- For SRC approval, upload the SRC Approval Letter in eIRB.
- For college/department peer review:
 - The reviewer logs a comment in the study's workspace in eIRB documenting their approval if they are listed as a guest in eIRB.
 - An email from the reviewer is uploaded in eIRB documenting their approval.
 - The reviewer signs the *Scientific/Scholarly Review Attestation for Human Subjects Research* form and upload it to eIRB.

If supplemental documentation is granted as part of the review, it should be uploaded in eIRB. The scientific/scholarly reviewer cannot be affiliated with the project in any way to eliminate any potential conflicts of interest, with the exception of an advisor/mentee role.

The Scientific/Scholarly review should include assessment of the following:

- Is the rationale for the study clearly stated and is the rationale scientifically sound?
- Are the aims and corresponding hypothesis clearly stated?
- Is the primary outcome (and secondary outcomes, as appropriate) clearly defined?
- Are there adequate preliminary data in the literature (or from the investigator) to justify the proposed research? Has an adequate literature review been done to support this study?
- Is the question or hypothesis being tested providing important knowledge to the field?
- Is the design of the study appropriate for the questions that are posed?
- Have the validity and reliability of measures been established or are there methods proposed for establishing validity and reliability?
- Is the proposed subject population appropriate?
- Are statistical considerations, including sample size and justification, estimated accrual and duration, and statistical analysis clearly described and adequate to meet the study objectives?
- Are all the proposed tests or measurements requested necessary to answer the scientific question?
- Are the investigators well qualified to conduct this study?
- Is the proposed research novel and new?

Responsible Physician Review

When a project involves medical procedures for which the Principal Investigator is not licensed to conduct, a Responsible Physician must be appointed. The designated Responsible Physician must be listed on the Local Study Team Members page in eIRB as a "Responsible Physician." In addition, attestation from the Responsible Physician is required upon eIRB submission. Attestations in one of the following formats will be accepted:



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- The Responsible Physician logs a comment in the study's workspace in eIRB documenting their approval;
- An email from the Responsible Physician is uploaded in eIRB documenting their approval; or
- The Responsible Physician signs the *Responsible Physician Attestation for Human Subjects Research* form and upload it to eIRB.

The Responsible Physician certifies that they are a physician licensed by the State of Arizona; they will be responsible for ensuring that all procedures that are part of this project, and procedures that require the attendance of a licensed physician, will have a suitable physician present during the procedures; and they will inform the IRB before any procedures are conducted if they are unable to attend the procedures.

Department/Center/Section Review

The following human research submissions require attestation from the Principal Investigator's home Department/Center/Section reviewer: all new project submissions, PI changes, and Reportable New Information (RNI). Review attestation. Attestations from the Department/Center/Section reviewer will be accepted in one of the following formats:

- The Department/Center/Section reviewer logs a comment in the study's workspace in eIRB documenting their approval if they are listed as a guest in eIRB;
- An email from the Department/Center/Section reviewer is uploaded in eIRB documenting their approval; or
- The Department/Center/Section reviewer signs the *Department/Center/Section Review Attestation for Human Subjects Research* form and upload it to eIRB.

The Department/Center/Section reviewer certifies that all departmental requirements are met, and the investigator has adequate resources to conduct the human research.