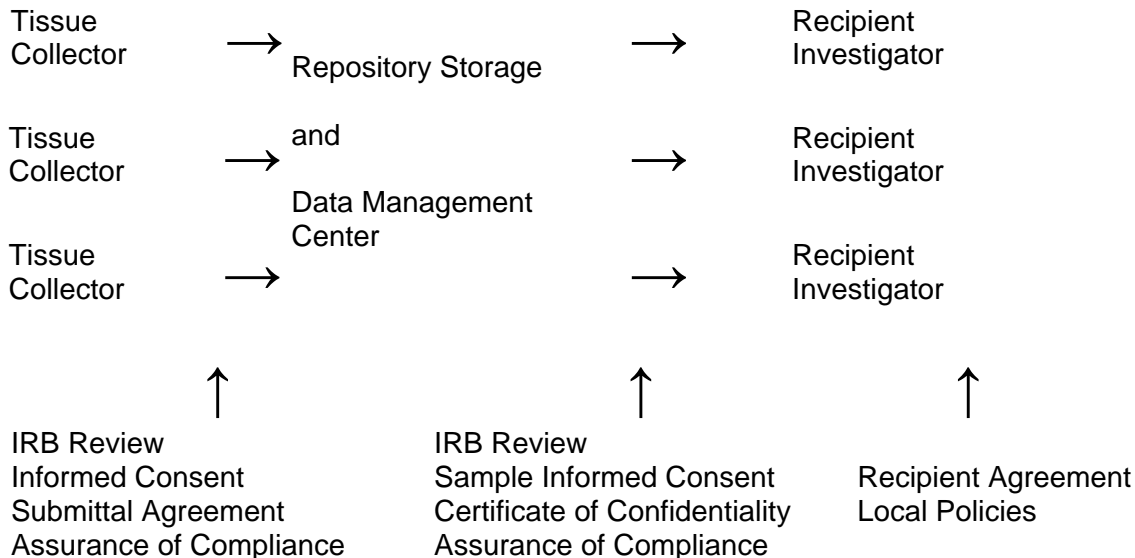


**Department:** UAMS Institutional Review Board  
**Policy Number:** 17.11  
**Section:** Special Populations  
**Effective Date:** July 31, 2002  
**Revision Date:** August 25, 2004

**SUBJECT: Stored Data or Tissues**

Operation of the Repository and its data management center will be subject to oversight by the UAMS IRB. The IRB will review and approve a protocol specifying the conditions under which data and specimens may be accepted and shared, and ensuring adequate provisions to protect the privacy of subjects and maintain the confidentiality of data. The IRB will also review and approve a sample collection protocol and informed consent document for distribution to tissue collectors and their local IRBs. A Certificate of Confidentiality should be obtained to protect confidentiality of repository specimens and data.

1. Human Tissue Repositories collect, store, and distribute human tissue materials for research purposes. Repository activities involve three components: (i) the collectors of tissue samples; (ii) the repository storage and data management center; and (iii) the recipient investigators.
2. If supported by the Department of Health and Human Services (HHS), each component must satisfy certain regulatory requirements.



The Office for Human Research Protection (OHRP) formerly known as OPRR, provides the following guidance in response to requests from Institutional Review Boards, the National Institute of General Medical Sciences (NIGMS), and the research community.

1. **Local IRB Review.** Collection of data and specimens for inclusion in the NIGMS Human Genetic Mutant Cell Repository should be subject to oversight by local Institutional Review Boards (IRB) convened by the collecting institutions under OHRP-

approved Assurances.<sup>1</sup> The local IRB is familiar with the particular circumstances of its research setting and is in the best position to weigh critical considerations like local professional and community standards, institutional policies and resources, and the needs of differing patient or subject populations.

2. **Informed Consent.** Written informed consent should be obtained from each donor-subject in accordance with Department of Health and Human Services (HHS) regulations at 45CFR46.116.

Included among the basic elements of informed consent should be a clear description of (i) the operation of the cell repository; (ii) the specific types of research to be conducted; (iii) conditions under which data and specimens will be released to recipient-investigators; and (iv) procedures for protecting the privacy of subjects and maintaining the confidentiality of data. Informed consent information describing the nature and purposes of the research should be as specific as possible. Where human genetic research is anticipated, informed consent information should include information about the consequences of DNA typing (e.g., regarding possible paternity determinations). Informed consent documents may not include any exculpatory language through which subjects are made to waive or appear to waive any legal rights.

The Cell Repository should provide tissue collectors with an NIGMS-approved sample informed consent document containing these elements and with a sample protocol for tissue collection. The UAMS IRB may request copies of these sample documents to assist in their review of local informed consent documents and protocols.

3. **Oversight of Repository Activities.** Operation of the NIGMS Human Genetic Mutant Cell Repository and its data management center will be subject to oversight by an Institutional Review Board convened by the Coriell Institute of Medical Research under an OHRP-approved Assurance of Compliance. The IRB should review and approve a protocol specifying the conditions under which data and specimens may be accepted and shared, and ensuring adequate provisions to protect the privacy of subjects and maintain the confidentiality of data. The IRB should also review and approve a sample collection protocol and informed consent document for distribution to tissue collectors and their local IRBs. A Certificate of Confidentiality should be obtained to protect confidentiality of repository specimens and data.
4. **Submittal Agreement.** A written submittal agreement for tissue collectors should require written informed consent of the donor-subjects utilizing an informed consent document approved by UAMS IRB. It should also contain an acknowledgment that collectors are prohibited from providing recipient-investigators with access to the identities of donor-subjects or to information through which the identities of donor-subjects may readily be ascertained.
5. **Usage Agreement.** A written usage agreement for recipient-investigators should include the following: "Recipient acknowledges that the conditions for use of this research material are governed by the cell repository Institutional Review Board in accordance with Department of Health and Human Services regulations at 45CFR46. Recipient agrees to comply fully with all such conditions and to report promptly to the

cell repository any proposed changes in the research project and any unanticipated problems involving risks to subjects or others. Recipient remains subject to applicable State or local laws or regulations and institutional policies which provide additional protections for human subjects. This research material may only be utilized in accordance with the conditions stipulated by the cell repository IRB. Any additional use of this material requires prior review and approval by the cell repository IRB and, where appropriate, by an IRB at the recipient site, which must be convened under an applicable OHRP-approved Assurance."

6. Under certain circumstances, collecting institutions may elect to rely upon the Cell Repository IRB at Coriell Institute. This requires a written Cooperative Amendment, signed by the collecting institution and the Coriell Institute, and approved by OHRP. Contact OHRP for details.

In response to requests from the National Institute of General Medical Sciences (NIGMS), the Office for Protection from Research Risks (OHRP) provides the following clarification regarding submission of "non-identifiable" materials to the Human Genetic Mutant Cell Repository.

As Chart 1 (attached) illustrates, human subjects are involved in research when the research involves (i) an intervention or interaction with a living individual that would not occur (or would occur in some other fashion) but for the research; **or** (ii) the use of identifiable private data or information in a form associable with a living individual [45CFR16.102(f)].

Human subjects would not be involved when material submitted to the Repository satisfies **both** of the following conditions:

1. The material, in its entirety, was collected for purposes other than submission to the Repository (e.g., the material was collected solely for clinical purposes, or for legitimate but unrelated research purposes, with no "extra" material collected for submission to the Repository).

**and**

2. The material is submitted to the Repository without any identifiable private data or information (i.e., no codes or linkers of any sort may be maintained, either by the Submitter or by the Repository, that would permit access to identifiable private data or information about the living individual from whom the material was obtained).

While OHRP requires neither an Assurance of Compliance nor a Certification of Institutional Review Board review [45CFR46.103(a),(f)] for activities that do not involve human subjects, local institutional requirements regarding review of such activities are, nevertheless, binding. Some institutions may require IRB or administrative review of all research activities involving human materials, even where "human subjects" are not involved.

OHRP offers the following guidance concerning operation of human cell repositories under Department of Health and Human Services (HHS) regulations for the protection of human subjects (45 CFR 46). The guidance assumes that repository activities include nonexempt human subjects research as defined under HHS regulations.

1. The operation of any HHS-supported human cell repository and its data management center should be subject to oversight by an Institutional Review Board (IRB) convened under an applicable OHRP-approved Assurance of Compliance. This IRB should set the conditions under which data and specimens may be accepted and shared. OHRP strongly recommends that one such condition stipulate that recipient-investigators not be provided access to the identities of donor-subjects or to information through which the identities of donor-subjects may readily be ascertained.
2. Collection of data and specimens should be subject to oversight by local IRBs convened under applicable OHRP-approved Assurances.
3. Written informed consent should be obtained from each donor-subject in accordance with HHS regulations at 45CFR46.116. Included among the basic elements of informed consent should be a clear description of (i) the operation of the cell repository; (ii) the specific types of research to be conducted; (iii) the conditions under which data and specimens will be released to recipient-investigators; and (iv) procedures for protecting the privacy of subjects and maintaining the confidentiality of data.
4. Informed consent information describing the nature and purposes of the research should be as specific as possible.
5. Where human genetic research is anticipated, informed consent information should include information about the consequences of DNA typing (e.g., regarding possible paternity determinations).
6. Informed consent documents may not include any exculpatory language through which subjects are made to waive or appear to waive any legal rights.
7. OHRP recommends that the cell repository develop a sample collection protocol and informed consent document for distribution to collector-investigators and their local IRBs.
8. A written submittal agreement for collector-investigators should require written informed consent of the donor-subjects utilizing an informed consent document approved by the local IRB. It should also contain an acknowledgment that collector-investigators are prohibited from providing recipient-investigators with access to the identities of donor-subjects or to information through which the identities of donor-subjects may readily be ascertained.
9. A written usage agreement for recipient-investigators should include the following:

"Recipient acknowledges that the conditions for use of this research material are governed by the cell repository Institutional Review Board in accordance with

Department of Health and Human Services regulations at 45CFR46. Recipient agrees to comply fully with all such conditions and to report promptly to the cell repository any proposed changes in the research project and any unanticipated problems involving risks to subjects or others. Recipient remains subject to applicable State or local laws or regulations and institutional policies which provide additional protections for human subjects.

This research material may only be utilized in accordance with the conditions stipulated by the cell repository IRB. Any additional use of this material requires prior review and approval by the cell repository IRB and, where appropriate, by an IRB at the recipient site, which must be convened under an applicable OHRP-approved Assurance.

10. OHRP recommends that a Certificate of Confidentiality be obtained to protect confidentiality of human cell repository specimens and data.