

Request for an IRB Expedited or Full Review
Human Participants in Non-medical Research

Expedited review is for research that does not quite meet the federal guidelines for exemption, but which involve small risks to subject (see section B below).

Check if either of the following apply:

- This is a continuation of a research project that has received Rhodes IRB approval. Only trivial changes in procedures or data collection have taken place since the approval. *Note: Highlight any changes in bold.*
- This is a research project that has received IRB approval at another institution. Describe your role in the project in this application and include the IRB application and approval from the institution that has already approved the project.

Section A: Applicant Information and Assurances

Research Team (add rows to Table as needed)

- 1) Name = name of research team member
- 2) Rhodes Role = specify if student, staff, or faculty member; if team member is not affiliated with Rhodes, please specify the individual's institutional or community partner affiliation
- 3) Contact information = provide your email address
- 4) Team Role = primary investigator (PI), team member, etc.
 - a. Please note that per Rhodes IRB policy, PIs must be full time staff or faculty members.
 - b. Part time staff and faculty may be co-PIs with a full time staff or faculty member co-PI
 - c. Students may not be the PI
- 5) Ethics Training = state the year in which training was completed and attach documentation of completion if the IRB does not have proof of completion on file. Ethics training must be renewed every four years.

<u>Name</u>	<u>Rhodes Role (or other affiliation)</u>	<u>Contact Information</u>	<u>Team Role</u>	<u>Ethics Training</u>

Investigator’s Assurance:

I certify that the proposed research includes only those activities checked in Section B below. I agree to report any significant and relevant changes in the research protocol to the IRB. I agree to conduct the research in accordance with the principles outlined in the Belmont Report at <http://www.hhs.gov/ohrp/humansubjects/guidance/belmont.htm> (or the Belmont report summary in the IRB folder within the faculty items folder on the College Info volume)

I certify that the research will not be initiated until approval is secured from the IRB.

Investigator(s):

Section B: Summary Information and Criteria for Expedited Review

Title of Project:

Participant Population:

- | | |
|--|---|
| <input type="checkbox"/> Children | <input type="checkbox"/> Prisoners or parolees |
| <input type="checkbox"/> Elderly | <input type="checkbox"/> Non-English speaking individuals |
| <input type="checkbox"/> Pregnant women | <input type="checkbox"/> Rhodes College students/staff |
| <input type="checkbox"/> Cognitively or psychologically impaired | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Residents of mental health institutions | |

Location of Research:

- | | |
|---|---|
| <input type="checkbox"/> Rhodes College | <input type="checkbox"/> Specify other locations: _____ |
|---|---|

Some risk is acceptable under expedited review provided it is something that at least a majority of reasonable people might agree to do, the negative effects are short-lived (normally less than an hour), or the subject agrees to the risk beforehand.

Expedited review cannot be used if the research involves: major deceptions, vulnerable populations (children, pregnant women, prisoners, mentally disturbed etc.); placing subjects under risk of being harmed physically or psychologically; invasive means of obtaining biological samples (blood, DNA, etc.); having subjects report about highly sensitive issues (drugs, sex, crime, cheating, etc), or if the research question prevents subjects from giving informed consent.

Section C: Project Description

Please answer the following questions [respond at the paragraph mark, use as much space as necessary].

Purpose: Provide a brief summary of the extant literature. Be clear in identifying the novel contribution your work will make to the scholarly body of work in your area.

Procedure:

1. Describe all procedures in which participants will be involved.
2. Estimate how long each procedure will take.
3. Attach all surveys, interview questions, or other instruments to be used as additional attachments.

Sample:

1. What is the participant population?
2. What inclusion and exclusion criteria will be used for your sample?
3. How will participants be recruited?
4. How many participants do you plan to use?

Data:

1. How will the investigator(s) record the data collected in the study?
2. Where will the data be stored? How will the data be stored securely?
3. Will the data be recorded with or without identifying information?
4. Will the data be stored with or without identifying information?
5. How long will you maintain data with identifying information?
6. What reporting procedures will you use to ensure anonymity (e.g., aggregating data from small n groups so that the minimum group size is ≥ 10).

Risks and Benefits

1. Explain the potential risks and discomforts to participants.
2. How have you minimized the risks involved with participation in your study?
3. What are the potential benefits of participating in your study?

Consent:

1. What is the consent process?
2. Do your participants have the capacity to consent? What steps have been taken to ensure comprehension of your consent procedure and the potential risks involved in your study?
3. If using a signed consent document, please include it as an attachment when submitting your application. Written documentation of consent, while appropriate in many circumstances, is not required. However, the principle of respect for persons does require that subjects are fully informed in a manner comprehensible to them and that they be assured that their participation is completely voluntary. If opting out of obtaining a signed consent document, please attach one (or more) of the following documents:
 - a. Information sheet
 - b. Consent script that will be read to participants

Debriefing

1. How will participants be debriefed?
2. What information (if any) will be withheld from participants prior to or during the study procedures? How will participants be informed of this withheld information following completion of the study?

Section D: Checklist

1. Completed application
2. Valid certificate of completion for ethics training (for each member of the research team)
3. Consent document (Information Sheet, Consent Script, or Consent form)
4. Surveys, instruments, interview questions, stimuli, etc.
5. Letter(s) of support from necessary partners to demonstrate feasibility of study (if necessary).

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IRB Use Only:

- This project has IRB approval by vote of:
- This project must be submitted to the IRB for full review by a vote of:
- Additional information is requested

IRB Signature:

Date: