**NON-INTERVENTIONAL TEMPLATE - PROTOCOL TITLE HERE**

***Title:*** *This should include study descriptors and target population (e.g., patient population, disease stage if applicable, if it is a single center or multi-center study, type of non-interventional study, etc.). Acronyms should be spelled out.*

***Template use:*** *This template has been created to assist in the development of a non-interventional investigator-initiated research study protocol. Section titles and the order in which they are presented in this template may be modified as needed. Instructional text in blue should be deleted before submission. Any language in black is recommended language to be used, but can and should be modified as appropriate.*

***Initial SRC/IRB Review****: The initial protocol should be submitted and approved by SRC prior to IRB submission. If this template is being used, this template version should be submitted to the IRB (there should never be an SRC protocol version and IRB protocol version).*

***Protocol revisions****: Each update or change to the protocol should be accompanied by a new version date and tracked changes within the protocol, and it must be reviewed by the SRC as well as by the IRB. Ideally there should be a summary of changes at the end of the protocol with rational for each change made within the protocol. SRC and IRB submission may be completed in tandem (after initial SRC/IRB approval).*

***Version date of template:*** *7.19.22*

**PRINCIPAL INVESTIGATOR**: Name/Credentials

 Institution/Department or Division

 Address

 City, State, Zip

 Phone: [Here]

 Fax: [Here]

 Email: [Here]

**PARTICIPATING SUB-SITES**:For external sub-Is include (one per site):

 Name/Credentials

 Institution

 Address, City, State, Zip

 Phone: [Here]

 Fax: [Here]

 Email: [Here]

**STATISTICIAN**: Name/Credentials

Email: [Here]

*If statistician is external, also list their Institution, address, and phone*

If statistical support has not been obtained, please contact the Quantitative Data Sciences Core (QDSC) by submitting a request using [**this link**](https://redcap.nubic.northwestern.edu/redcap/surveys/?s=7YAAR3YFHJ), prior to submitting to the SRC. Depending on the nature of the non-interventional study, the [Feinberg Biostatistics Collaboration Center](https://www.feinberg.northwestern.edu/sites/bcc/research-services/index.html) or [Social Science Data Services](https://www.library.northwestern.edu/libraries-collections/government-collection/social-science-data.html) may be more appropriate.

Note: statistical support may not be required for all non-interventional studies.

**FUNDING SOURCE**: Name

If the project is supported financially by a grant or company, please list here. If not applicable, please enter N/A here.

**VERSION DATE:** MM.DD.YYYY

Each draft should have its own version date for clarity. Please consider including amendment number here also.

Clinical Trials Office

Robert H. Lurie Comprehensive Cancer Center

Northwestern University

676 N. St. Clair, Suite 1200

Chicago, IL 60611

<https://www.cancer.northwestern.edu/research/clinical-trials-office/index.html>

*Note: only include the above CTO information if the CTO is the coordinating center.*

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*Please update the contents section once protocol is complete (by clicking on the table of contents →Update Table).*

# Study Schema

*The study schema is not a mandatory section. This section can be removed if deemed not necessary, however, it can be helpful to show the study design and general study plan in a diagram or pictorial representation. For example:*

Eligible population (n=sample size)

Register to study

Describe endpoints, study procedures, or observational data to be collected, as applicable

Parameters for subjects completing study & follow up, as applicable

#  Study Summary

|  |  |
| --- | --- |
| **Title** | Full title of protocol |
| **Version** | Include date & amendment number |
| **Study Design** | Study type and design attributes (e.g., biorepository, clinical database, observational, prospective chart review, specimen collection, quality-of-life, survey etc.) |
| **Study Center(s)** | If multi-center, list all projected centers to be involved & indicate who the lead site will be.  |
| **Objectives** | At a minimum, list all primary & secondary objectives (Can refer to the body of the protocol for any exploratory objectives, if applicable). |
| **Sample Size** | Number of subjects projected for the entire study (may specify number of evaluable subjects required). |
| **Study Duration** | Include how long it will take to reach the target sample size plus duration of subject participation on study. |
| **Patient Population & Key Eligibility Criteria** | Note the main clinical disease state under study and some of the significant inclusion or exclusion criteria (do not list all criteria here) |

# Introduction – Background and Rationale

*Provide background information particularly relevant to your study, including references. Discuss the reasoning for conducting the study in light of the background information already presented. Include the potential benefits of the study. Consider providing rationale for each of the following:*

* + *The study design being used, including the primary endpoints.*
	+ *The population being studied.*

# Objectives

*Primary objectives of study – listed and numbered individually. Objectives should always be tied to the planned statistical plan/analysis.*

## Primary Objective

## Secondary Objective(s)

## Exploratory Objective(s) if applicable

# Subject Eligiblity

The target population for this study is subjects with [insert description]. This will be a [multicenter or single-center] trial conducted at Northwestern University. Remove or revise the following as appropriate: Northwestern University (NU) will serve as the lead site and coordinating center for this study.

*Vulnerable populations, including (but not limited to) adults unable to consent, individuals who are not yet adults (infants, children, teenagers), pregnant subjects, prisoners and any other vulnerable populations, should be considered in the inclusion/exclusion criteria. They can be listed in a note that they are not excluded from the study or listed as exclusionary.*

## Inclusion Criteria

*Consider including the following, if applicable:*

* *Diagnosis required, i.e., “Histologically confirmed…”*
* *Extent or stage of disease required*
* *Prior therapies or medical history*
* *Age range*
* *If involving actual subjects, should include a statement about the eligibility of*

*pregnant/lactating subjects and subjects who are sexually active and/or of reproductive potential, if applicable*

* *All subjects must have given signed, informed consent prior to any study procedures being completed.*

## Exclusion Criteria

*List any criteria which would specifically exclude subjects from the study, or specify that there are no exclusion criteria, as applicable.*

# Subject Recruitment and Registration

*Describe how subjects will be recruited and consented, including where and by whom. Refer to Section 11, for specific details on the consenting process, or specific details on waiver or alteration of consent. Consider including information of any recruitment materials to be used for the study. If not recruiting actual subjects (i.e., database query for eligible tissue samples), state what will be queried, and how and by whom eligible samples will be identified. Subjects should be entered in NOTIS with registration information by the study team once eligibility has been confirmed.*

## Registration Procedures in NOTIS

At the time of registration, the research team will assign participants a subject ID, which is a unique identifying code. Registered participants will be tracked in NOTIS along with their subject ID, date of registration, date of birth (month and year at a minimum must be collected), gender, race, ethnicity, and zip code.

*Registration information and basic subject demographics are in NOTIS is required, even if data is being collected in REDCap or another database. It is also recommended to add language about uploading the consent at the same time as entering registration information for the patient in NOTIS.*

# Study Design & Methods

*Describe the overall study design, as well as the methods for collection and testing of samples, as applicable. Clearly state any surveys, questionnaires, procedures or assessments to be completed on the study, if applicable. Include whether the study is retrospective, prospective, or both, and date ranges for study duration if applicable. Include timepoints for data collection as applicable. Also, include characteristics about any data/specimens to be analyzed, if applicable. Consider including processing information of specimens. If specimens are to be banked for future use please describe where they will be stored, length of time of they will be stored, how they will be accessed and who will have access to them. Include a list of what data is planned to be collected in this section or as an appendix (and reference the appendix here).*

## Duration of Participation

*The duration depends on the specific study design and follow-up period for the subject. For trials with no treatment involved, this section may not be necessary.*

## Duration of Follow-Up/Data Collection (if applicable)

*Consider including information about how long subjects will have data collected by the study, after completion of procedures/assessments/specimen collections etc. for the study*.

## Removal of Subjects from Study

*Please consider including information regarding subject withdrawal of consent or subjects being withdrawn from the study without their consent and any circumstances under which this may occur, if applicable. Please consider including details of what data/specimens etc. may be retained or destroyed by the study, and any data that may continue to be collected, if applicable.*

# Study Procedures

*Modify the below table as appropriate to fit the study plan. Column headings may be changed, added, removed, or combined. Procedures and activities should be listed in the far left column. Use of footnotes to provide clarity and detail is encouraged. This table provides examples of assessments and timeframes. When completing this section, think about what assessments are required to be collected, at a minimum, to ensure study endpoints are met.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Time Period** | **Baseline** | **Week 1** | **Follow Up4** |
| **Assessment of Activity** |
| Informed Consent | X |  |  |
| Research Tissue1 | X |  |  |
| Research Blood2 | X | X |  |
| Questionnaires | X | X | X |
| Clinical and Laboratory Data Collection3 | X | X | X |
| Survival Status |  |  | X |

1. Archival tissue will be collected at baseline for analysis. Consider including number of slides, thickness etc.
2. Blood samples will be collected at baseline and Week 1. Consider including amount of blood, tube type, assay type, type of data you hope to obtain, and in Section 7.0 a high-level statistical analysis/plan.
3. Data to be collected: *describe here*. In addition, at baseline the following data will also be collected: demographics, diagnosis information, medical history.
4. Subjects will have data collected every 3-6 months (for 2 years) for clinical outcomes, including treatment response, disease progression, or death.

# Statistical Plan

*This may be called “ANALYSIS” if more appropriate.*

*This must be written/reviewed by a statistician prior to SRC submission. Should include proposed sample size and justification if necessary, as well as endpoint assessments and statistical analysis that corresponds directly to the stated objectives of the study. If recruitment of subjects is involved, must include a statement of feasibility. Consider including any definitions relating to objectives and their respective endpoints. Please consider including definitions of evaluable subjects for endpoints, and information regarding inclusion/exclusion rules for any subject that may not compete study procedures or drop out early. Note: this section may not be applicable to all non-interventional research studies (i.e., biobanks) and should only be included if endpoint analysis is planned/statistician support is necessary. If not necessary, clearly state rationale or justification for no statistical plan.*

## Primary Endpoint

## Secondary Endpoints

## Exploratory Endpoints (if applicable)

# Data Collection & Record Keeping

*This section should include a description of who will perform what tasks, and how data will be compiled and stored. NOTIS or REDCap are examples of systems that maybe used. Headings below are for guidance, depending on the system or database used, consider using the headings and modify or adapt accordingly. Data should be kept secure with minimal risk of subject confidentiality issues. Please explain the process for data capture and storage, including the use of any keys connecting subject names and identifying information with subject ID. Please include any additional information for external site access. For example, external sites, access to REDCap can be obtained by signing a* [*REDCap*](https://www.nucats.northwestern.edu/resources/data-science-and-informatics/software-tools-development/redcap.html) *User Agreement, which can be provided by the project owner, and following the instructions that will be provided following completion of the User Agreement.*

## Data Confidentiality (Including Protected Health Information (PHI) & HIPAA)

*Please consider including information on security and access of databases used, both at Northwestern and at external sites, as applicable Please consider including language about PHI and HIPAA. If necessary, include information on* [*NU’s data encryption policy*](https://www.it.northwestern.edu/policies/dataencryption.html)*.*

## Case Report Forms (eCRFs)

*Include this section if eCRFs will be used; they may not be for a non-interventional study. Describe the eCRF, and how data will be collected.*

## Records Retention

*Please modify language as appropriate for your study.*

Records for the study will be retained for at least [insert number] years after the investigation is completed and will be accessible only to study personnel. Upon completion of the study, the data files will be fully anonymized and the links between subjects and the codes will be deleted. Final data will be shared in accordance with NIH policy. All identifiable information will be removed from the data.

*NU and the IRB have data retention policies that may be relevant:* [*Research Data Policy*](https://cpb-us-e1.wpmucdn.com/sites.northwestern.edu/dist/c/3231/files/2020/02/Research_Data_Policy.pdf)

# Financial Compensation

Subjects will not be compensated for participation in this study.

*Or*

Subjects will be compensated for participation in this study with a payment of $XX.

*If subjects are compensated for participation, please explain specific details of how, when and what records will be used to document the receipt of payment to the patient.*

# Potential Benefits and/or Risks to Subjects

*Consider adding information about the potential benefits of the study even if there is no direct benefit to subjects. Please include any risks to subjects, and at a minimum, include risk of loss of confidentiality.*

# Results Sharing with Subjects

*Please include whether or not the subjects will be informed of test results with details on how these results will be shared.*

# Study Management

## Institutional Review Board (IRB) Approval and Consent

P*lease modify or adjust language below to accurately portray the consenting process to be conducted in the study. If waiver of consent is requested, this section can be removed.*

It is expected that the IRB will have the proper representation and function in accordance with federally mandated regulations. The IRB should approve the consent form and protocol.

In obtaining and documenting informed consent, the investigator should comply with the applicable regulatory requirement(s) and should adhere to Good Clinical Practice (GCP) and to ethical principles that have their origin in the Declaration of Helsinki.

Before recruitment and enrollment onto this study, the patient will be given a full explanation of the study and will be given the opportunity to review the consent form. HIPAA authorization will be obtained as part of the consent. Each consent form must include all the relevant elements currently required by local or state regulations. Once this essential information has been provided to the patient, and the investigator is assured that the patient understands the implications of participating in the study, the patient will be invited to give consent to participate in the study by signing an IRB-approved consent form.

Prior to a patient’s participation in the trial, the written informed consent form should be signed and personally dated by the patient and by the person who conducted the informed consent discussion.

## Consenting Subjects with Limited Proficiency in English

*Note: Include this section only if it is applicable and is not one of the exclusion criteria listed in Section 3.2. Information on the process of consenting subjects with limited proficiency of English can be found on the* [*IRB website*](https://irb.northwestern.edu/resources-guidance/consent-templates-hipaa-requirements/short-forms/).

For potential study patients with limited proficiency in English, a short form consent document (written in the language understood by the patient) will be used during the initial consent process. In addition, the services of an interpreter who is fluent in both English and the language understood by the potential study patient will be used to explain the contents of the long form consent document (written in English). If the patient enrolls, they will be re-consented using an IRB-approved long form consent document that has been translated to the language understood by the patient, when it is available. The process will be conducted in accordance with guidelines and policies of the IRB of record.

## Waiver/Alteration of Consent

*Please delete this section if consent of subjects is planned. If no consent or a modified consent is planned, complete this section with justification. Justification should include the following information:*

* *Why no consent or a modified consent will be completed (e.g., subjects may have been lost to follow-up)*
* *Research involves no more than minimal risk to subjects*
* *Research could not be carried out practicably without the waiver or alteration*
* *The waiver or alteration will not adversely affect the rights and welfare of the subjects; and,*
* *Where appropriate, the subjects will be provided with additional information about their participation/whether or not debriefing is necessary.*

*Refer to the* [*NU IRB website*](https://irb.northwestern.edu/resources-guidance/consent-templates-hipaa-requirements/consent-hipaa/waiver-alteration-informed-consent.html) *for additional information.*

## Instructions for Participating Sites

*Remove this language if no additional sites are planned. Please modify language accordingly.*

Before the study can be initiated at any site, the following documentation must be provided to the PI and team (as applicable):

* Completed feasibility assessment(s) to verify site’s capacity to support a Northwestern sponsored trial
* Signed copy of Northwestern University’s Data Participating Site Acknowledgement which details data submission guidelines
* Draft consent form for review and approval prior to submission to the local IRB
* A copy of the official IRB approval letter for the protocol and informed consent
* A copy of the IRB approved informed consent
* Pertinent credentials (CVs, MLs, CITI & GCP Training and FDFs) for the local PI and any sub-investigators who will be involved in the study at the site
* Form FDA 1572 appropriately filled out and signed with appropriate supporting certifications

Additional activities may be required prior to site activation (i.e. contract execution, study-specific training, and delegation of authority log). Full requirements will be outlined in the study start-up packet upon successful completion of a feasibility assessment.

## Northwestern University acting as single IRB in Multi-center Research

*Remove this language if NU will not be acting sIRB for multi-center research. If NU will be acting as sIRB please modify the below language accordingly.*

The Sponsor-Investigator will be responsible for ensuring that all local site investigators conduct the study in accordance with applicable federal regulations and local laws. No study-related activities will happen at relying sites until reliance agreements are fully executed.

Prior to implementing the protocol at each participating site, the current version of the protocol, informed consent form, HIPAA authorization and other relevant documents, as applicable, must be first approved by the Northwestern University Institutional Review Board (IRB) at Northwestern University. In addition, each participating site must be added to the NU IRB study application and IRB approved. The Sponsor-Investigator also will be responsible for the distribution of the most current version of the protocol, consent document, HIPAA authorization, and other relevant study documents, as applicable, to each participating site, in accordance with local regulations.

The Sponsor-Investigator will be responsible for the distribution of relevant safety information and problems (inclusive of reportable events), interim results, and the closure of the study, where relevant, to participating sites in accordance with local regulations. The Sponsor-Investigator will be responsible for ensuring that all IRB-approved modifications to the protocol, consent document, HIPAA authorization, and other applicable materials have been communicated to sites. The Sponsor investigation will be responsible for ensuring that all required approvals (initial, continuing review and modifications) have been obtained by the single IRB.

Upon receipt of all required documents and approvals, the PI and/or team at Northwestern University will formally contact the site and grant permission to proceed with enrollment.

Subjects will be recruited according to local site recruitment methods, as described in the protocol and local policies. Recruitment methods not under the control of the local site will not be used.

The Sponsor-Investigator will be responsible for ensuring that non-compliance with the study protocol or applicable requirements will be reported in accordance with the policies of the single IRB.

The Sponsor-Investigator will be responsible for ensuring that all engaged participating sites will safeguard data, including secure transmission of data, as required by local information security policies.

## Amendments

*Please modify language accordingly.*

All amendments to the protocol and informed consent document will be subject to the review and approval of the appropriate local, institutional, and governmental regulatory bodies, as applicable. Amendments will be distributed by the lead institution (Northwestern) to all participating external sub-sites (if applicable) upon approval by the Northwestern University IRB.

## Investigator Obligations

The Principal Investigator is responsible for the conduct of the clinical trial at the site in accordance with the Declaration of Helsinki. The PI must assure that all study site personnel, including sub-investigators and other study staff members, adhere to the study protocol and all local regulations and guidelines regarding clinical research both during and after study completion.

# References

*Please begin on separate page*

# Appendices

*Please begin on separate page. May include data to be collected, detailed specimen processing procedures, patient tools (i.e. questionnaires), etc.*