INDIRA GANDHI MEDICALCOLLEGE

SHIMLA

SCHEDULE OF PROCEDURE

(SOP)

INSTITUTIONAL ETHICS COMMITTEE

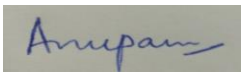
Standard Operating Procedures

Institutional Ethics Committee
Indira Gandhi Medical College Shimla

I. Prepared by: SOP teams of Institutional Ethics Committee,2014; Version1.

II. Revised in 2020: Version 2

III. Verified by:



Dr. Anupam Parashar,
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IV. Approved and Issued by:

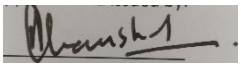

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Table of Contents

SOP.1

ESTABLISHING AND CONSTITUTING THE INSTITUTIONAL ETHICS COMMITTEE

1. PURPOSE

To establish and constitute Institutional ethics committee (IEC), IGMC SHIMLA

2. SCOPE

Applicable to IGMC Shimla

3. RESPONSIBILITY

Principal, IGMC Shimla is responsible for implementing the SOP

3. PROCEDURE

4.1 Principal, IGMC will propose the chairman and member Secretary for IEC

4.2 Chairman & Member Secretary will confirm their acceptance to the principal by providing all the required information for membership **(**Document 2**)**

4.3 The Principal will ensure that the IEC is established in accordance with the applicable laws and regulations of the state, country and in accordance with the value and principles of communities they serve (Document 1)

4.4 Principal will designate and instruct Chairman of IEC to conduct regular proceedings of IEC for the institute.

4.5 At regular intervals, Principal will review the functioning of IEC.

4.6 A Subcommittee will be formed from the member of the IEC which will be responsible for the approval of protocols of the MD/MS/MCH/DM and research project of MBBS students on the recommendation of protocol committee nominated by principal IGMC Shimla.

SOP.2.

ESTABLISHING AND CONSTITUTING THE INSTITUTIONAL ETHICS COMMITTEE

1. PURPOSE

To appoint suitable members for the IEC, IGMC Shimla

2. SCOPE

Applicable to IGMC Shimla.

3. RESPONSIBILITY

Principal, IGMC Shimla and Chairman are responsible for implementing the SOP

4. PROCEDURE

4.1 Principal in consultation with the Chairman will propose the members of IEC, who have the qualification and experience as per GCP guidelines of CDSCO and New Drugs and Clinical Trials Rules, 2019 & send them to secretary health & family welfare for proper orders.

4.2 When needed, IEC will invite subject experts to offer their views.

4.3 The appointment of an IEC member will be for 3 years.

4.4 During this term principal can recommend disqualification of any member if, the contribution is not adequate and/or there is long period of member's non availability and send the case to Secretary, Health & Family Welfare Government of Himachal Pradesh for proper orders.

4.5 Member will have the right to discontinue from membership of IEC after giving written notice at least one month in advance.

4.6. Principal can propose replacement of the member secretary & chairman of IEC as and when required.

4.7 Each member is required to sign the declaration and confidentiality agreement regarding IEC activities (Document -2)

4.8 Principal can nominate IEC member to undergo orientation program in national and international developments in ethics from time to time

4.9 A member nominated from the faculty of IGMC Shimla ceases to be a member from the date of his/her superannuation.

4.10 In case of any study involving vulnerable population like HIV, Females, appropriate persons from the vulnerable population will be invited as member to safeguard their interest.

SOP.3.

ROLES AND RESPONSIBILITIES OF CHAIRPERSON, MEMBER SECRETARY AND ETHICS COMMITTEE MEMBERS

1. PURPOSE

Roles and responsibility of ethics committee members.

2. SCOPE

Applicable to IGMC Shimla

3. RESPONSIBILITY

The Chairman and Member Secretary are responsible for implementing this SOP

4. PROCEDURE

4.1 The Member Secretary in consultation with the Chairman will convene the IEC meeting once in every three to four months.

4.2 Additional review meetings will also be held at short notice as and when required. Meetings will be planned in accordance with the work load.

4.3 All the IEC meetings will be held regularly on scheduled date that are announced and notified in advance.

4.4 All the proposals will be received at least three weeks before the meeting, checked for completeness initially by the office clerk, subsequently by the member secretary (through a nominated person) using the evaluation form (**Form III**)

4.5 Members will be given not less than 10 days' time in advance to review study proposals and the relevant documents.

4.6 Minutes of the IEC meetings, all the proceedings and deliberation will be documented.

4.7 Signatures of the Chairman and the Member Secretary & all present members will be obtained on the minutes of the meeting document. The minutes will be circulated to all guides /HOD in case of student/thesis protocols.

4.8 Applicant, sponsor or investigator may be invited to present the proposal or elaborate on specific issues.

4.9 Independent experts may be invited to the meeting or to provide written comment, subject to applicable confidentiality agreement. They will not have a role in decision making.

4.10 Before the newly constituted IEC members take charge they will be invited to attend and undergo a workshop to make them well versant with the **provisions of Institutional Ethics Committee, GCP guidelines (CDSCO) and New Drugs and Clinical Trials Rules, 2019** and as amended from time to time. The members will also be apprised of the recent amendments in these guidelines during the IEC meetings and by holding workshops/ seminars from time to time.

4.11**Roles and Responsibilities of Chairperson of ethics committee**:

1. To conduct meetings and to be accountable for efficient functioning of the committee
2. To ensure active participation of all members in all discussions and deliberations
3. Seek conflict of interest from members and ensure quorum and fair decision making
4. Handling of complaints against investigators, IEC members, conflict of interest issues and requests for use of IEC data
5. To ratify the minutes of previous meetings
6. To review serious adverse events with causality assessment
7. Is the final authority of the ethics committee to take any decision on disqualification of a member and recommend his/her termination to the head of the institution
8. Is the approval authority for SOPs of ethics committee
9. Responsible for making any communications on behalf of the ethics committee to CDSCO/DCGI and any other regulatory bodies.

4.12**Roles and Responsibilities of Member Secretary of ethics committee**:

1. To organize an effective and efficient procedure for receiving, preparing, circulating and maintaining each proposal for review
2. To schedule IEC meetings, prepare the agenda and minutes.
3. To organize IEC documentation, communication and archival
4. To arrange for training of IEC secretariat and members
5. To ensure that SOPs are updated as and when required
6. To ensure adherence of IEC functioning as per SOPs
7. To prepare for and respond to audits and inspections
8. To Ensure completeness of documentation at the time of receipt of protocols, and timely inclusion in the agenda for IEC review.
9. To assess the need for exemption from review, expedited review or full review

4.13**Roles and Responsibilities of Members of ethics committee:**

1. All members are expected to review the research proposals and attend the ethics committee meetings, and participate in the discussions and deliberations
2. To review the revised submissions, additional submissions, progress reports and final reports
3. To review the reports of serious adverse events, and recommend appropriate actions
4. To carry out monitoring visits at study sites as and when needed
5. To maintain confidentiality of the documents and deliberations of ethics committee meetings
6. To declare conflict of interest if any, to the Chairperson
7. To participate in continuing education activities in research ethics and get updated on relevant guidelines and regulations.

SOP.4.

GUIDELINES FOR INITIAL SUBMISSION OF PROPOSALS FOR REVIEW BY INSTITUTIONAL ETHICS COMMITTEE

1. PURPOSE

To set initial submission procedures for proposal review by IEC.

2. SCOPE

Applicable to **Principal Investigators** from IGMC Shimla

3. RESPONSIBILITY

All investigators are responsible for implementing this SOP. Every protocol or amendment submitted for review to IEC must contain number, version and date. All the research proposals must be submitted in the prescribed application form, duly filled along with all necessary documents for the review. Proposals may be submitted for review and after the approval, fee (as applicable) needs to be submitted.

4. PROCEDURE

4.1 The Project Investigator has to submit an application in a prescribed format along with study protocol and other study related documents necessary for review of the IEC {**Form IA**}. All research proposals must be submitted in English language only. For clinical trials the proposal has to be sent as per Performa {**Form II**}. For MD/MS/DM/MCH/PhD candidates (for Thesis protocols or Dissertation protocols) /MBBS student projects {**Form IB**}

4.2 Application can be submitted to the office of the Member Secretary, IEC IGMC Shimla on any working day.

4.3 All the proposals and documents must be submitted at least three weeks in advance from the scheduled date of IEC meeting.

4.4 Ten copies of study proposals (with all the documents) must be submitted for Regular Ethics Committee review along with application form duly signed and dated by the investigator(s). A soft copy of the proposal must also be submitted on the email id of IEC.

4.5 Receipt of the application will be acknowledged by the IEC office.

4.6. Every application will be allotted an IEC registration number to be used for all future correspondence and reference.

4.7 Every research proposal will have to pay a fee as under

a. For drug trials a sum of Rs.10,000 /- (Ten thousand only) per project.

b. For human studies other than drug trials a sum of Rs. 5000/- (Five thousand only)

4.8 The fee to be paid in the form of a demand draft payable to Member Secretary Institutional Ethics Committee, IGMC Shimla.

4.9 There will however be no fees for the thesis protocols of MD/MS, DM/MCH and projects of MBBS student of this institution.

SOP.5.

PROCEDURES FOR CHECKING RESEARCH PROPOSALS BY OFFICE OF MEMBER SECRETARY

1. PURPOSE

To **check the research proposals** submitted by the investigators for completeness.

2. SCOPE

Applicable to Office of Member Secretary IGMC Shimla.

3. RESPONSIBILITY

The **office of Member Secretary** is responsible for implementing this SOP.

4. PROCEDURE

4.1 Every proposal will be collected and compiled by the Institutional Ethics Committee office.

4.2 An office staff nominated by the member secretary will verify the proposals for completeness as per the checklist.

4.3 In case of incomplete data, the investigators will be informed by the office after consulting the Member Secretary to the make the necessary corrections and to resubmit.

4.4 The supporting staff available to the Ethics committee will be

- Clerk (Record Keeper) 1No.

- Data Entry Operator 1 No.

- Class IV 1 No.

4.5 The office of Member-Secretary IEC will be located in the premises of Academic Section, Principal Office, IGMC Shimla.

SOP.6.

ELEMENTS OF REVIEW OF PROPOSALS BY INSTITUTIONAL ETHICS COMMITTEE

1. PURPOSE

To **review the research proposals** submitted by the investigators both scientifically and ethically.

2. SCOPE

Applicable to IGMC Shimla

3. RESPONSIBILITY

All **members of IEC** are responsible for implementing this SOP.

4. PROCEDURE

4.1 The Member Secretary is responsible for **categorizing the protocols for review as full review, expedited review and exempted from review as per ICMR National Ethical Guidelines for Biomedical and Health Research involving Human Subjects 2017**. The suggestions/guidance of the Chairperson is taken whenever necessary.

4.2 All research proposals presenting more than minimal risk that are not covered under exempt or expedited review will be subjected to full committee review.

4.3 Every proposal will be sent not less than 10 days before the meeting to all members of IEC. They will evaluate them on ethical issues, scientific soundness and technical excellence of the proposed research, before it is taken up for main IEC review (As per checklist in **Form III**)

4.4 All the members will evaluate the possible risks to the study participants with proper justifications, the expected benefit and adequacy of documentation for ensuring privacy confidentiality and justice issue. The review will be done as per the guidelines of **ICMR National Ethical Guidelines for Biomedical and Health Research involving Human Subjects 2017, New Drugs and Clinical Trials Rules 2019and GCP guidelines**.

4.5 The IEC review will be done through formal meetings and will not resort to decision through circulation of proposal.

4.6 Expert opinion of additional members would be obtained if necessary.

SOP.7.

GUIDELINES FOR EXPEDITED REVIEW AND APPROVAL OF RESEARCH PROPOSALS

1. PURPOSE

To provide **expedited review and approval** of a research proposal

2. SCOPE

Applicable to the members of IEC of IGMC Shimla.

3. RESPONSIBILITY

All **members of Ethics Sub-Committee** are responsible for implementing this SOP.

4. PROCEDURE

4.1IEC will receive and consider the proposals for expedited review and approval for the studies having/involving:

i. Minor deviations from originally approved research causing no risk or minimal risk to trial participants.
ii. Modifications or amendment to approved protocol including administrative changes or correction of typographical errors and change in investigator(s)
iii. Research involving non-identifiable specimen and human tissue from sources like blood banks, tissue banks, left over clinical samples
iv. Research involving clinical documentation materials which are non-identifiable (data, documents, records)
v. Progress/annual reports where there is no additional risk e.g. activity limited to data analysis
vi. The protocols of MD/MS/MCH/DM & research projects of MBBS students if they do not include drug trial & any potential risk to study subjects.
vii. All other proposals which do not comply with the above criteria will be reviewed in the Regular Ethics Committee meeting.

4.2 All expedited approvals will be given in a meeting of the Sub-Committee comprising of Chairperson or member secretary and 1-2 designated members.

4.3Decision taken by the Sub-Committee on expedited approvals will be put up before the IEC at its next regular meeting for ratification.

SOP.8.

PROCEDURE FOR REVIEW OF CLINICAL TRIALS (CONDUCT/ RECRUITMENT, INFORMED CONSENT, REVIEW OF ONGOING STUDIES, DEVIATION AND VIOLATIONS, SEVERE ADVERSE EVENTS AND PAYMENT OF COMPENSATION).

1. PURPOSE

To provide procedures for Review of Clinical Trials (Conduct & recruitment, Informed consent, review of ongoing studies, deviation and violations and SAEs) by IEC.

2. SCOPE

Applicable to **Principal Investigators** from IGMC Shimla

3. RESPONSIBILITY

All investigators are responsible for implementing this SOP. Every protocol or amendment submitted for review to IEC must contain number, version and date. All the research proposals must be submitted in the prescribed application form, duly filled along with all necessary documents for the review.

4. PROCEDURE

4.1 The Project Investigator has to submit an application in a prescribed format along with study protocol and other study related documents necessary for review of the IEC {**Form II**}. All research proposals must be submitted in English language only.

4.2 Application can be submitted to the office of the Member Secretary, IEC IGMC Shimla on any working day.

4.3 All the proposals and documents must be submitted at least three weeks in advance from the scheduled date of IEC meeting.

4.4 Ten copies of study proposals (with all the documents Form II, Form IVA & IVB, Form V) must be submitted for full review of the Ethics Committee along with application form duly signed and dated by the investigator(s). A soft copy of the proposal must also be submitted on the email id of IEC.

4.5 **Conduct of Clinical Trial**

4.5.1. Clinical trial should be conducted in accordance with the principles as specified in Third Schedule of New Drugs and Clinical Trials Rule 2019, principles of Good Clinical Practice and ICMR National Ethical guidelines for biomedical and health research involving human participants.2017.

4.5.2 All clinical trials must be conducted in a manner that ensures the dignity, rights, safety and wellbeing of the study participants.

4.5.3 Written informed consent must be obtained from each participant. before any research related procedure is performed.

4.5.4 The IEC will review the no of patients recruited for the trial as per guidelines, dropped out and reasons for drop out of study participants.

4.5.5 Adherence to the clinical trial protocol is essential and if amendment of the protocol becomes necessary the rationale for the amendment shall be provided in the form of a protocol amendment.

4.5.6Protocol amendments, if become necessary before initiation or during the course of a clinical trial, all such amendments should be submitted to the Central Licensing Authority in writing along with the approval by the Institutional Ethics committee IGMC Shimla.

4.5.7. No deviations from or changes to the protocol should be implemented without prior written approval of the ethics committee and Central Licensing Authority except when it is necessary to eliminate immediate hazards to the trial subject or when change involves only logistic or administrative or minor aspects of the trial. All such exceptions must be immediately notified to the ethics committee as well as to the Central Licensing Authority.
Administrative or logistic changes or minor amendments in the protocol should be notified to the Central Licensing Authority within thirty days.

4.5.8 All the PI undertaking clinical trials are to do CTRI registration mandatorily and CTRI reg.no. should be communicated to the committee.

4.5.9 In case a clinical trial is to be conducted in collaboration with an international agency, it is mandatory to register the trial with the Health Ministry's Screening Committee.(https://www.icmr.nic.in/content/guidelines.

4.5.10 In case the PI is collaborating with other institutions for clinical trial, Memorandum of Understanding (MOU)for collaborative studies/ Agreement between collaborating partners is to be submitted.

4.5.11 Ethics Committee clearance of Nodal/other centers in case of multicentric studies (if applicable) is also to be submitted.

4.6. Informed Consent–

4.6.1 In all trials, a freely given, informed, written consent is required to be obtained from each study subject. The Investigator must provide information about the study verbally as well as using a patient information sheet, in a language that is nontechnical and understandable by the study subject.
4.6.2 The subject's consent must be obtained in writing using an "Informed Consent Form". Both the patient information sheet as well as the informed consent form should have been approved by the ethics committee and furnished to the Central Licensing Authority. Any changes in the informed consent documents should be approved by the ethics committee and submitted to the Central Licensing Authority before such changes are implemented.
4.6.3 Where a subject is not able to give informed consent (e.g. an unconscious person or a minor or those suffering from severe mental illness or disability), the same may be obtained from a legally acceptable representative (LAR). A legally acceptable representative is a person who is able to give consent for or authorize an intervention in the patient as provided by the law of India.
4.6.4 If the trial subject/ his or her legally acceptable representative is unable to read or write, an impartial witness should be present during the entire informed consent process who must append his or her signature to the consent form.
4.6.5 In case of clinical trials on pediatrics, the subjects are legally unable to provide written informed consent, and are dependent on their parent or legal guardian to assume responsibility for their participation in clinical studies. In such case-
a. Written informed consent should be obtained from the parent or legal guardian. However, all pediatric participants should be informed to the fullest extent possible about the study in a language and in terms that they are able to understand.
b. Where appropriate, pediatrics participants should additionally assent to enroll in the study. In case of mature minors (7-12 years) oral consent should be recorded and adolescents (12-18 years) should personally sign and date a separately designed written assent form which also is to be signed by the parents or LAR.
c. Although a participant's wish to withdraw from a study must be respected, there may be circumstances in therapeutic studies for serious or life-threatening diseases in which, in the opinion of the Investigator and parent or legal guardian, the welfare of a pediatrics patient would be jeopardized by his or her failing to participate in the study. In this situation, continued parental or legal guardian consent should be sufficient to allow participation in the study.

4.6.6 **A checklist of essential elements** to be included in the study subject's **informed consent document as well as a format for the informed consent form for trial subject** is given (**Form IV A & IV B**).
4.6.7 An audio-video recording of the informed consent process in case of vulnerable subjects in clinical trials of New Chemical Entity or New Molecular Entity including procedure of providing information to the subject and his understanding on such consent, shall be maintained by the investigator for record:

Provided that in case of clinical trial of anti-HIV and anti-leprosy drugs, only audio recording of the informed consent process of individual subject including the procedure of providing information to the subject and his understanding on such consent shall be maintained by the investigator for record.

4.7 Review of on-going studies

4.7.1 The Institutional Ethics committee IGMC Shimla will make, at appropriate intervals, an ongoing review of the trials as per approved protocol. A sub-committee will be formed for the review of ongoing clinical trials and such a review may be based on the periodic study progress reports furnished by the investigators or monitoring and internal audit reports furnished by the sponsor or visiting the study sites as per requirement of the ongoing study.

4.7.2 The continuing review of protocols is to be done by the ethics committee once in six months for the clinical trials, and once in a year for the academic studies.

4.7.3 A decision regarding whether the project needs to be reviewed more frequently will be taken during the IEC meeting in which the project is finally approved and will be recorded in the minutes. A fresh decision to increase review may be taken if required based on the SAE reports, monitoring reports, or safety concerns. The IEC will review the progress made in the protocol (number of patients recruited, dropped out, reasons for drop-out), the occurrence of unexpected events or problems, and compliance of the investigator regarding IEC communication.

4.7.4 If the PI fails to submit documents for continuing review within the stipulated date, the Member Secretary will send a reminder notice asking the PI to submit the documents within 7 days. Further, non-response or failure to submit documents will be discussed in the full board meeting of the IEC. Action could be one of the following: one more reminder and asking the PI to give an explanation for the failure to submit documents / withdrawing the ethical approval granted and asking the PI not to continue the study/ any other action which is deemed appropriate. The head of the institution will be informed of the decision of the IEC.

4.8 Procedure for attending the issues related to protocol deviation/ non-compliance/ violations

4.8.1 The Secretariat will notify the Member Secretary of any protocol deviation/violation report received from the PI/ from any source within 2 working days of receipt of the notification.

4.8.2 The action of the IEC will be based on:

The nature and seriousness of the deviation / violation, Frequency of deviation/ violation in the study in the past, Frequency of deviation/ violation in previous studies conducted by the same PI/ Co-PI or in the same department.

4.8.3 Member Secretary will decide on the impact of the protocol deviation / violation and act accordingly. Depending upon the seriousness, the ethics committee shall do the following:

- Ask PI for written clarification as soon as the deviation is received

- If the impact is serious, this report will be shared with the Chairperson and two or more ethics committee members may be designated by the Chairperson for investigating the issue.

4.8.3 The Secretariat will put up the information and communication at the next full committee meeting for discussion. The Chairperson will take a final decision depending on the seriousness of the violation. The decision will be taken to ensure that the safety and rights of the research participants are safeguarded. The decision will be taken by consensus, and the quorum required for the meeting is same as that required for the initial approval of the protocol. The DCGI/ other relevant regulatory authorities will be informed.

4.9 Serious adverse events Review/ Reporting and recommendation for payments of compensation as per chapter VI of New Drugs and Clinical Trials Rules 2019

4.9.1Any serious adverse events should be notified to the IEC IGMC Shimla within 24 hours by the PI. Serious adverse events during clinical trial shall be reported in accordance with the New Drugs and Clinical Trials Rules, 2019. Any report of the serious adverse event, after due analysis shall be forwarded by the sponsor to the Central Licensing Authority, the Chairperson of the ethics committee and the head of the institution where the trial has been conducted, within fourteen days of knowledge of occurrence of the serious adverse event as specified in Schedule3 of New Drugs and Clinical Trials Rules, 2019.

4.9.2 The IEC Secretariat will receive the following documents within the specified time frame if an SAE is experienced by any research participant (**Form VI**):

- Initial SAE report to be submitted by the Principal Investigator (PI) within 24 hours of occurrence.
- Due analysis should be submitted by the PI within 14 days from the occurrence of the SAE
- Due analysis will also be submitted by the sponsor within 14 days
- The follow up reports of all on-site SAE till the event is resolved.

4.9.3 The IEC Secretariat will verify that the report is complete in all respects and that it has been received at the IEC office within the specified timelines. If the report has been received beyond the specified time, it will be considered as a protocol violation and action should be taken as described in SOP for protocol deviations. The IEC Secretariat will sign and write the date on which the report is received. The Secretariat will forward these reports to the SAE Subcommittee.

4.9.4 The SAE subcommittee will review the reports/ case history with a special focus on relatedness to the clinical trial, medical management and financial compensation to be given to the research participants. The applicable formulae and guidelines from the regulatory authority will be used during this discussion. The SAE subcommittee will hold the meeting with investigators and site visits as required. If deemed necessary, the SAE subcommittee may refer the issue to the IEC full board. The report of SAE subcommittee will be presented in the IEC full board meeting. An emergency meeting of IEC may be held for this purpose.

4.9.5 The PI will be requested to reply to the query letter on the SAE report within 7 working days. The ethics committee shall forward its report or order on the event, after due analysis, along with its opinion on the financial compensation, if any, to be paid by the sponsor or his representative or institution or Centre, as the case may be, in accordance with Chapter VI of New Drugs and Clinical Trials Rules, 2019.

4.9.6 The opinion regarding relatedness, medical management and compensation for research related injury will be communicated by the Ethics Committee to the Licensing authority (DCGI) within 30 calendar days of the occurrence of the SAE in case of regulatory clinical trials.

SOP.9.

PROCEDURES FOR REVIEW AND ON-SITE MONITORING OF APPROVED/ONGOING CLINICAL TRIALS.

1. PURPOSE

To describe the process of review and on-site monitoring of protocols approved.

2. SCOPE

This SOP is applicable to the regulatory trials and intervention studies for which on-site monitoring is undertaken by the Ethics Committee

3. RESPONSIBILITY

All members of Ethics Sub-Committee are responsible for implementing this SOP.

4. PROCEDURE

4.1 Review of on-going studies

4.1.1 The Institutional Ethics committee IGMC Shimla will make, at appropriate intervals, an ongoing review of the trials as per approved protocol. A sub-committee will be formed for the review of ongoing clinical trials and such a review may be based on the periodic study progress reports furnished by the investigators or monitoring and internal audit reports furnished by the sponsor or visiting the study sites as per requirement of the ongoing study.

4.1.2 The continuing review of protocols is done by the ethics committee once in six months for the clinical trials, and once in a year for the academic studies.

4.1.3 The decision regarding whether the project needs to be reviewed more frequently will be taken during the IEC meeting in which the project is finally approved and will be recorded in the minutes. A fresh decision to increase review may be taken if required based on the SAE reports, monitoring reports, or safety concerns.

4.1.4 The IEC will review the progress made in the protocol (number of patients recruited, dropped out, reasons for drop-out), the occurrence of unexpected events or problems, and compliance of the investigator regarding IEC communication.

4.1.4 If the PI fails to submit documents for continuing review within the stipulated date, the Member Secretary will send a reminder notice asking the PI to submit the documents within 7 days. Further, non-response or failure to submit documents will be discussed in the full board meeting of the IEC. Action could be one of the following: one more reminder and asking the PI to give an explanation for the failure to submit

documents / withdrawing the ethical approval granted and asking the PI not to continue the study/ any other action which is deemed appropriate. The head of the institution will be informed of the decision of the IEC.

4.2 On Site monitoring

4.2.1 **Time and Site of Visit**: The decision letter issued to the PI during approval of the protocol will have the statement on on-site monitoring of the study.
The routine monitoring of the protocols will be done at least once in a year.

4.2.2Two minimum visits are done for a study from initiation till completion.

Visit -1: During the progress of the study.
After the PI submits the first progress report (six months after initiation of the study); Verification of written records
Visit-2: Annually till the completion of the study.
4.2.3**"For-cause monitoring"** will be performed at sites for reasons identified by any member of the IEC, after approval by the Chairperson. The reasons for identifying a particular site for "for-cause monitoring" could include any one or more of the following:
Large number of Serious Adverse Events (SAE) reports/ Scientific misconduct/ Large number of Protocol deviations/ Complaints received from subjects, head of the institution or any other person (anonymous complaints received shall be entertained if they affect subject safety

4.2.4 During the Visit:

The Monitoring team will follow the check list and:

1. Check the log of delegation of responsibilities of study team
2. Check if the site is using latest IEC approved current versions of the protocol, informed consent documents, case record forms, diaries, advertisements, etc.
3. Observe the informed consent process, if possible
4. Review randomly selected participants files to ensure that participants are signing the correct informed consent,
5. Check investigational product accountability is adequately controlled and documented throughout the product flow at the study site (arrival, dispensing, use, return from the subject and return/destruction after the study),
6. Check for storage times, conditions and expiry dates to be acceptable and sufficient supplies available, wherever applicable,
7. Verify that the investigator follows the approved protocol and all approved amendment(s), if any,
8. Ensure that the investigator and the investigator's trial staff are adequately informed about the trial,
9. Verify that the investigator and the investigator's trial staff are performing the specified study functions, in accordance with the approved protocol and any other written agreement between the

sponsor and the investigator/institution, and have not delegated these functions to unauthorized individuals,

10. Verify that the investigator is enrolling only eligible subjects,
11. Determine whether all SAEs are appropriately reported within the time as per the applicable regulatory requirement(s). Case record forms would be checked to review the safety data i.e. Adverse Events (AEs) and SAEs for the volume or severity of adverse events,
12. Review the project files of the study to ensure that documentation is filed appropriately.
13. Review the source documents for their completeness,
14. Collect views of the study participants, if possible.

4.3. Decision taken by the Sub-Committee will be brought to the notice of the main committee members at next regular meeting of the IEC and their concurrence taken into record.

SOP.10.

POLICY FOR FINANCIAL DECLARATION OF PAYMENTS OF ETHICS COMMITTEE.

1. PURPOSE

This SOP describes the **financial transparency** in Institutional Ethics Committee IGMC Shimla.

2. SCOPE

This SOP is applicable to financial transactions of the ethics committee including payments received and disbursed by the Ethics Committee IGMC Shimla

3. RESPONSIBILITY

The Member Secretary, the Secretariat and all members of IEC are responsible for implementing this SOP.

4. PROCEDURE

4.1. Every research proposal will have to pay a fee as under
a. For drug trials a sum of Rs.10,000 /- (Ten thousand only) per project.
b. For human studies other than drug trials a sum of Rs. 5000/- (Five thousand only).

4.2. The fee is to be paid in the form of a demand draft payable to Member Secretary Institutional Ethics Committee, IGMC Shimla. The Ethics Committee has an account for the same.

4.3 There will however be no fees for the thesis protocols of MD/MS, DM/MCH and projects of MBBS student of this institution.

4.4 The external members of the Institutional Ethics Committee IGMC Shimla receive honorarium for the review work and the meetings attended. The remuneration is rupees 1,000/ meeting which is paid through the cheque from the account of the Ethics Committee.

4.5 For the expenditures of refreshments served in the meetings, remittance is done through this account. For the day to day expenditures of stationery, transport and other miscellaneous expenditures payment is made through the ethics committee account.

4.6 This account is audited annually and utilization of the amount is monitored.

SOP.11.

PROCEDURE FOR DECISION REGARDING APPROVAL OF SUBMITTED RESEARCH PROPOSALS.

1. PURPOSE

To make a **decision regarding approval of the submitted research proposal**.

2. SCOPE

Applicable to the IEC of IGMC Shimla

3. RESPONSIBILITY

All **members of IEC** are responsible for implementing this SOP.

4. PROCEDURE

4.1. In making decision on application for the ethical review of any research proposal, IEC will consider the following:

4.1.1. Member having a **conflict of interest** will indicate to the Chairman prior to the review of application and same will be recorded in the minutes.

4.1.2. Where there is conflict of interest, that Member will be withdraw from the decision-making procedure.

4.1.3 A decision will only be taken when sufficient time has been allowed for the review.

4.1.4 Decision will only be taken at meeting **where a quorum** (e.g. Five in a Committee of 10) is complete after ensuring that quorum is **as per ICMR National Ethical Guidelines for Biomedical and Health Research involving Human Subjects 2017, New Drugs and Clinical Trials Rules 2019 and GCP Guidelines**.

4.1.5 Decision will be taken only after reviewing a complete application with all the required documents necessary for proposal.

4.1.6 Only IEC members who participated in review and discussion will participate in decision making.

4.1.7 Wherever possible the decision will be arrived through consensus and not by vote, but when a consensus appears unlikely voting can be resorted to.

4.1.8 Decision will specify the conditional decision if any, with clear suggestions and re-review procedure.

SOP.12.
PROCEDURE FOR NOTIFYING REVIEW OUTCOME OF SUBMITTED PROPOSALS

1. PURPOSE

To **communicate the decision** of IEC to the applicant.

2. SCOPE

Applicable to the IEC of IGMC Shimla

3. RESPONSIBILITY

Member Secretary is responsible for implementing this SOP.

4. PROCEDURE

4.1. A decision of the IEC will be communicated to the applicant. A certificate of the approval will be sent to the applicant within 2 weeks (**Document-3**). All the approvals will be valid only for three years or for the duration of the project whichever is less. Investigator has to get his or her project re-approved after three years if necessary.

4.2. The communication of the decision will include:

- Name and address of IEC.

- The date and place of decision.

- The name and designation of the applicant.

- Title of the research proposal reviewed

- The clear identification of protocol no., version no., date, amendment no. date.

- A clear statement of decision reached.

- Any advice by the IEC to the applicant.

- In case of conditional decision any requirement by IEC including suggestions for revision and the procedure for having the application reviewed.

- In case of rejection of the proposal, reason(s) for the rejection will be clearly stated.

- Signature of the member secretary with date.

SOP.13.

PROCEDURE FOR FOLLOW UP OF ONGOING RESEARCH PROPOSALS BY THE INSTITUTIONAL ETHICS COMMITTEE

1. PURPOSE

To carry out the **follow-up** of the research proposals.

2. SCOPE

Applicable to the IEC of IGMC Shimla

3. RESPONSIBILITY

All members of IEC and the investigators are responsible for implementing this SOP.

4. PROCEDURE

4.1. IEC will review the progress of all the studies for which a positive decision has been reached from the time of decision till the termination of research.

4.2. Progress of all the research proposals will be followed **at regular interval** of once a year. But in special situations, IEC will conduct the follow up **review at shorter intervals** basing on the need, nature and events of research project.

4.3. All the requirements and procedures for the follow-up review will be similar to that of initial and main review.

4.4. Following instances and events will require the follow-up review:
4.4.1. **Any protocol amendment** likely to affect rights, safety or wellbeing of research subject of conduct of study.
4.4.2. **Serious or unexpected ADR** related to study or product, action taken by Investigator, sponsor and Regulatory authority.
4.4.3. Any event/ information that **may affect the benefit/risk ratio of the study**.

4.5. A **decision of follow up review** will be issued and communicated to the applicant indicating **modification/suspension/termination** of the project.

4.6. In case of **premature suspension/termination**, the **applicant** must notify the IEC of the reasons for the suspension/termination with a summary of the result.

4.7. **Applicant** must inform the time of completion of study and must send the result summary to IEC **annually or earlier** if required by IEC. IEC must receive a copy of **final summary of study completed** from the applicant.

SOP.14

PROCEDURES TO ARCHIVE THE STUDY RELATED DOCUMENTS, PROCEEDINGS AND COMMUNICATIONS

1. PURPOSE

To archive the study related documents, proceedings and communications.

2. SCOPE

Applicable to the Office of IEC of IGMC Shimla

3. RESPONSIBILITY

The Member Secretary and Secretariat is responsible for implementing this SOP.

4. PROCEDURE

4.1. All the documents and communications of the IEC will be dated, filed and archived in a secure place.

4.2. Only persons, who are authorized by the chairman of IEC will have the access to the various documents.

4.3. All the document related to research proposals will be archived for a minimum period of 5 years in the institute, following the completion/termination of the study.

4.4. No documents (except agenda) will be retained by any IEC member.

4.5. At the end of each meeting, every member must return all the research proposals and the documents to IEC office staff. They will archive one copy in IEC office and other copies will be destroyed after one year.

4.6. **Following documents will be filed and archived** with proper label on the top of file for easy identification of proposal.

4.6.1. The constitution, written SOPs of the IEC, and regular (annual) reports.

4.6.2 The curriculum vitae of all IEC members.

4.6.3. A record of all income and expenses if any, of the IEC, including allowances and reimbursements made to the secretariat and IEC members.

4.6.4. The published guideline for submission established by the IEC.

4.6.5 The agenda of the IEC meetings. The minutes of the IEC meetings.

4.6.6. One copy of all the material submitted by an applicant.

4.6.7. A copy of the decision & any advice or requirements sent to an applicant.

4.6.8 All written documentation received during the follow-up.

4.6.9. The notification of completion, premature termination of study.

4.6.10 The final summary or final report of the study.

Institutional Ethics Committee (Human Studies)

Indira Gandhi Medical College, Shimla

GENERAL GUIDELINES

1. **Meeting dates:** The meeting of Institute Ethics Committee will be held in the first week of the months of April, August and December.

2. **Project Submission Deadline**: 5th day of March/ 5th day of July/ 5th day of November. Applications received after the deadline will be taken up in the next meeting.

3. All proposals should be submitted in the prescribed application form (Form IA/IB/II/IV/V whichever applicable) as mentioned in the Standard Operating Procedures(SOPs) available on the website.

4. All relevant documents and the required number of copies should be enclosed with application form.

5. A total of 10 hard copies should be submitted to the IEC Secretariat and one soft copy in pdf format to be mailed to **email id- iec.igmc.sml@gmail.com** from the email of the Principal Investigator of the project **or email of the postgraduate student/ Guide (for MD/MS/DM/MCH/PhD thesis protocols) or guide in case of (MBBS student projects)**. The proposal should be complete in all aspects.

6. For research projects involving clinical drug trials, the project also needs to be registered with the Clinical Trial Registry in ICMR (CTRI). For details visit Website: **www.ctri.nic.in**

7. In case a clinical trial is to be conducted in collaboration with an international agency, it is mandatory to register the trial with the Health Ministry's Screening Committee.(https://www.icmr.nic.in/content/guidelines)

8. The date of meeting will be intimated to the researcher, to be present, if necessary, to offer clarifications or will be called during the meeting, if needed.

9. The IEC will review every research proposal on human participants before the research is initiated.

10. After the research is initiated it is compulsory for the Principal Investigator to submit the annual progress report of the research (or earlier if desired by the IEC).

11. Final report should be submitted at the end of the study.

12. For resubmitted proposals, 3 hard copies along with soft copy on email of the Institutional Ethics Committee (from the email of the Principal Investigator of the project) should be submitted. Point wise reply to IEC letter of comments to be given in the covering letter.
13. Premature termination/ suspension/ discontinuation of the study is to be informed to the Institutional Ethics Committee (human Studies) IGMC, Shimla.
14. Any Severe Adverse Effect (SAE) or any unexpected adverse event should be reported to the Institutional Ethics Committee within 24 hours. The report of any SAE or unexpected adverse event after analysis must be submitted to the Chairman IEC and the Head of Institution where trial is being conducted within 14 calendar days of SAE.
15. The requisite application fee wherever applicable to be submitted at the time of application or before the letter of permission by IEC.
16. For further details refer to the Standard Operating Procedures (SOP) provided on the IGMC website.
17. Applicants are also requested to consult following documents before submission of the proposal.

- the ICMR National Ethical Guidelines on Biomedical Research involving Human participants 2017(https://icmr.nic.in/sites/default/files/guidelines/ICMR_Ethical_Guidelines_2017.pdf),
- New Drugs and Clinical Trials Rules 2019 https://cdsco.gov.in/opencms/export/sites/CDSCO_WEB/Pdf-documents/NewDrugs_CTRules_2019.pdf
- Guidelines for Good Clinical Practice- ICH (https://www.ich.org/fileadmin/Public_Web_Site/ICH.../E6/E6_R1_Guideline.pdf)

Important information

The documents should be submitted to: Sh. Nitya Nand Sharma Suptd. Sr Grade II, Academic Section, Principal Office, Indira Gandhi Medical College Shimla

A complete set of documents should also be emailed to iec.igmc.sml@gmail.com

Incomplete applications will be returned.

Government of Himachal Pradesh.
Department of Medical Education.

NO: Health-B(14)-1/2005-Part-I Dated:Shimla-2 the 14/09/2018.

NOTIFICATION.

In supersession of all previous notifications issued in this regard, the Governor, Himachal Pradesh is pleased to constitute an "Ethics Committee" consisting of following members for smooth functioning developmental activities in IGMC, Shimla:-

S. NO	Name	Post.
1.	Dr. R.K. Kaushal, Ex. Professor and HOD Paediatrics, IGMC, Shimla.	Chairperson.
2.	Sh. Sarabjit Singh Bobby R/o 150 Lower Bazar, Shimla.	Member Layperson.
3.	Mrs. Kalpna Sanghaik, Social worker, Department of Radiotherapy, IGMC, Shimla.	Member NGO
4.	Sh. Shashi Kumar Shishoo, H.P. High court, Shimla.	Member Lawyer.
5.	Dr. Sanju Karol, Professor, Department of Economics, H.P. University, Shimla.	Member Social Sciences.
6.	Dr. P.K. Kaundal, Professor, Department of Pharmacology, IGMC, Shimla.	Member Basic Sciences.
7.	Dr. Punit Mahajan, Associate Professor, Department of Surgery, IGMC, Shimla.	Member Clinical
8.	Dr. Parmod Kumar Jaret, Associate Professor, Department of Medicine, IGMC, Shimla.	Member Clinical
9.	Dr. Anmol Gupta, Professor, Department of Community Medicine, IGMC, Shimla.	Member Epidemiologist.
10.	Dr. Anupam Prasher, Professor, Department of Community Medicine, IGMC, Shimla.	Member Secretary.

2. The main functions of the above Committee will be as under:-

(i) Research relating activities which involve human aspects.

(ii) Thorough examination of the projects.

(iii) Functioning and teaching of UGs/ PGs students in the Institution.

(iv) Better Hospital Services.

BY ORDER.

Addl. Chief Secretary(Health) to the
Government of Himachal Pradesh.

Endst NO:As above Dated:Shimla-2 the /09/2018.

Copy to:-

1. The Director, Medical Education and Research, H.P. Shimla-9 for information and necessary action.
2. The Principal, IGMC, Shimla.
3. The Principal, Dr. RPGMC, Tanda at Kangra, HP.
4. To all concerned.
5. Medical Superintendent, IGMC, Shimla.

17/9/18

Special Secretary(Health) to the
Government of Himachal Pradesh.

Sr. No.	Name	Qualification with specialization	Current origination	Telephone No, Fax No, ID and mailing address	Designation/role of member in Ethics Committee	Affiliation of member with institute that has constituted the Ethics Committee
1.	Dr. R.K. Kaushal	M.D. Pediatrics	Consultant Pediatrician Sri Ram Hospital Shimla	94186-70086 BasantVihar Kasumpati Shimla rkkaushal663@rediffmail.com.	Chairman	Retired from IGMC Shimla in 2011.
2.	Dr. Anupam Parashar, Professor, Deptt. of Community Medicine, IGMC Shimla.	MBBS,MD (Community Medicine)	Member Secretary Cum Professor, Deptt. of Community Medicine, IGMC Shimla.	9418035278 anupamvikrant@yahoo.co.in	Member Secretary	Professor, Deptt. of Community Medicine, IGMC Shimla.
3.	Sh. Sarbjit Singh Bobby Lay Person	Class VI.	Almighty Blessings, Rajiv Gandhi Cancer Hospital Shimla R/O 150 Lower Bazar Shimla	941806100 velabobby6100@gmail.com	Member Layperson	Nil
.	Mrs. Kalpna Sanghaik Social Worker, Deptt. of Radiotherapy, IGMC, Shimla	M.Phil(Public Administration),M.A. (History)	Sewa Bharti & associated with Sewa trust and Arogya Bharti	9418174542 kalpnasanghaik4@gmail.com	Member NGO	Nil

5	Sh. Shashi Kumar Shishoo, Lawyer HP High Court Shimla	B.Sc (Medical)L.L.B (PGDPM&LW)	H.P. High Court .	0177-2651523 9418232523 shashishirshoo@gmail.com	Member lawyer (71)	Nil
6.	Dr. Sanju Karol, Professor, Deptt. of Economics H.P University, Shimla	Higher Secondary,B.A MA Economics , M. Phil, Economics PH.D.Economics	Professor Deptt. of Economics & Director , Population Research centre Shimla	0177-2811135 9418189707 sanjukarol & yahoo.co.in	Member Social sciences.	Nil
7.	Dr. P.K. Kaundal Professor, Deptt. of Pharmacology, IGMC, Shimla.	M.B.B.S .M.D. (Pharmacology)	Professor Pharmacology IGMC Shimla	9816120050 pkkaundal66@gmail.com .	Member Basic Medical sciences	Professor Pharmacology IGMC Shimla
8.	Dr. Punit Mahajan Associate Professor, Deptt. of Surgery IGMC, Shimla	M.B.B.S , M.S (Surgery)	Assoc. Professor Deptt of Surgery IGMC Shimla	94181 51939 puneetd1@gmail.com.	Member clinical	Associate Professor, Deptt. of Surgery IGMC, Shimla
9.	Dr. Parmod Kumar Jaret Associate Professor, Deptt.	M.B.B.S .M.D. (Medicine)	Professor, Deptt.of Medicine, IGMC, Shimla	94180-85526 Parmodjaret @ yahoo .co.	Member clinical	Assoc. Professor, Deptt.of Medicine, IGMC, Shimla .
10	Dr. Anmol Gupta.	MBBS,MD, Community Medicine,PGD MCH	Professor Department of Community Medicine IGMC, Shimla	0177-2813690 dranmol 1964@gmail.com	Member Epidemiologist	Professor & HOD Department of Community Medicine IGMC, Shimla GMC Shimla.

Annexure 1 **Document -1**

Letter Ref: No:

From Date:

Principal

IGMC Shimla

To

Subject: **Constitution of Institution Ethics Committee (Human studies)**

Dear Sir/Madam

On behalf of Indira Gandhi Medical College Shimla, I request your concurrence for induction as a Member/Member Secretary/Chairman of Institutional Ethics Committee of this institute. Kindly send your written acceptance in the enclosed format and provide the necessary information requested.

On receipt of your acceptance, the name will be sent proper orders from Govt. of H.P.

Your Sincerely,

Signature:

Name:

ANNEXURE.2: **Document -2**

From

……

……

To

Principal,
IGMC, Shimla

Subject: Consent to be a Member /Member Secretary /Chairman of Institutional Ethics Committee (Human studies)

Dear Sir/Madam

In response to your letter stated above, I give my consent to become a member/member secretary /chairman of IEC of IGMC Shimla. I shall regularly participate in the IEC meeting to review and give my unbiased opinion regarding the ethical issues. I shall be willing for my name, profession and affiliation to be published I shall not keep any literature or study related document with me after the discussion and final review.

I shall maintain all the research project related information confidential and shall not reveal the same to anyone other than project related personnel.
I herewith enclose my C.V.

Thanking you,

Your Sincerely,

Signature…….

Name of the Member……. Date:

Address:

Telephone No: Off:

Res:

Email:

ANNEXURE.3: **Document:3**

Format for according approval to the clinical trial protocols by the Ethics Committee

To

Dr.

Dear Dr._____

The Institutional Ethics Committee reviewed and discussed your application to conduct the clinical trial entitled "……" on …… date

The following documents were reviewed:

a. Trial protocol (including protocol amendments), date ____version no_____

b. Patient Information Sheet and Informed Consent Form (including updated if any) in English and/or vernacular language.

c. Investigator's Brochure, dated _____ version no._____

d. Proposed methods for the patient accrual including advertisement (s) etc. proposed to be used for the purpose.

e. Principal Investigator's current CV.

f. Insurance Policy/Compensation for participation and for serious adverse events occurring during the study participation.

g. Investigator's Agreement with the Sponsor.

h. Investigator's Undertaking

The following members of the ethics committee were present at the meeting held on (date, time, place)

_____ Chairman of the Ethics Committee

_____ Member secretary of the Ethics Committee

_____ Name of each member with designation

1. Approved in its present form 2. Revision with minor modifications and approval after re-examination by member secretary or expedited review sub- committee. 3 Revision with major

modifications for resubmission- to be placed before full IEC for reconsideration. 4 Not approved- with clear reasons for non- approval.

The approval is subject to quarterly/ half yearly/annual review of the study. The Institutional Ethics Committee is to be informed about any serious adverse events occurring in the course of the study, any changes in the protocol and patient information sheet/informed consent form and is to be provided a copy of the final report on completion of the study.

Yours sincerely

Member Secretary, Ethics Committee.

ANNEXURE.4: **Form IA**

Proforma to be submitted to the Institutional Ethics Committee (Human studies) (for projects other than those mentioned in form IB**)**

Kindly submit 10copies of proforma and consent forms in English & Hindi to the Member Secretary, Institutional Ethics Committee (Human Studies), IGMC Shimla

1. Title of the project:

2. Name of the investigators/co-investigators with designation & department:

3. Number of projects already with the investigators/co-investigators:

4. Date of approval by scientific committee IGMC Shimla

5. Sources of funding

6. Objectives of the study:

7. Justification for the conduct of the study:

8. Methodology: It should provide details of the number of patients, inclusion criteria, exclusion criteria, control(s), study design, dosages of drug, duration of treatment, investigations to be done etc.:

9. Permission from Drug Controller General of India (DCGI) if applicable

10. Costs involved (Appx. In Rs)

a) Investigations b) Disposables

c) Exempted d) Drugs/Contrast Media

11. Ethical issues involved in the study:

less than minimal risk / more than minimal risk to the study subjects (for guidance please consult ICMR guidelines.

12. Do you need exemption from obtaining Informed Consent from study subjects- if so, give justifications?

13. Whether Consent forms part1 and 2 in English and in local language are enclosed?

14. Documents attached

    (a) Brief CV of investigators (including no. of projects with him/her)-Needed only for investigator/s from outside IGMC Shimla Brochure

    (b) Investigator's Brochure

    (c) Others

15. Conflict of interest for any other investigator(s) (if yes, please explain in brief)

16. We, the undersigned, have read and understood this protocol and hereby agree to conduct the study in accordance with this protocol and to comply with all requirement of the ICMR guidelines (2017)

Signature of the Investigators:
Signature of the Head of the Department

(Note: The proforma must be accompanied by consent forms I & II in English and Hindi Consent form I is equivalent to Patient Information Sheet. The investigators must provide information to the subjects in a simple language, and it should address the subjects, in a dialogue format)

ANNEXURE.5: **Form IB**

Proforma to be submitted to the Ethics Committee (Human studies) (for MD/MS/DM/MCH /PhD (for Thesis or Dissertation/MBBS student projects)

Kindly submit 3 copies of proforma and consent forms in English & Hindi to the member Secretary, Institute Ethics Committee (Human Studies), IGMC Shimla

1. Title of the project:

2. Name and Department /address of the investigators:

3. Number of Faculty (Guide/Co-guide) with designation & department:

4. Date of approval by Institute Research Council/ Scientific Advisory/ Thesis protocol scrutiny committee.

5. Sources of funding

6. Objectives of the study:

7. Justification for the conduct of the study:

8. Methodology: It should provide details of number of patients, inclusion criteria, exclusion criteria, control(s), study design, dosages of drug duration of treatment, investigations to be done etc:

9. Permission from Drug Controller General of India (DCGI) if applicable

10. Ethical issues involved in the study:

No risk/less than minimal risk / more than minimal risk to the study subjects (for guidance please consult ICMR guidelines2017).

11. Do you need exemption from obtaining Informed Consent from study subjects- if so give justifications?

12. Whether Consent forms part 1 and 2 in English and in local language are enclosed?

13. Conflict of interest for any other investigator(s) (if yes, please explain in brief)

14. We, the undersigned, have read and understood this protocol and hereby agree to conduct the study in accordance with this protocol and to comply with all requirement of the ICMR guidelines (2017)

Signature of the Investigators:

Signature of the Head of the Department

(**Note**: The proforma must be accompanied by consent forms I & II in English and Hindi Consent form I is equivalent to patient Information Sheet. The investigators must provide information to the subjects in a simple language, and it should address the subjects, in a dialogue format

ANNEXURE. 6: **Form II**

CONTENTS OF THE PROPOSED PROTOCOL FOR CONDUCTING CLINICAL TRIALS

1. **Title Page**

    a. Full title of the clinical study.

    b. Protocol/Study number, and protocol version number with date

    c. The IND name/number of the investigational drug

    d. Compete name and address of the Sponsor and contract research organization if any

    e. List of the Investigators who are conducting the study, their respective institutional affiliations and site locations

f. Name (s) of clinical laboratories and other departments and /or facilities participating in the study.

2. **Table of Contents**

A complete Table of Contents including a list of all Appendices.

1. Background and Introduction

    a. Preclinical experience

    b. Clinical experience

Previous clinical work with the new drug should be reviewed here and a description of how the current protocol extends existing date should be provided. If this is an entirely new indication, how this drug was considered for this should be discussed. Relevant information regarding pharmacological, toxicological and other biological properties of the drug/biologic/medical device, and previous efficacy and safety experience should be described.

2. Study Rationale

This section should describe a brief summary of the background information relevant to the study design and protocol methodology. The reason for performing this study in the particular included by the protocol should be provided.

3.A Study Objective (s) (primary as well as secondary) and their logical relations to the study design.

4.Study Design

a. Overview of the study Design: Including a description of the type study (i.e. double- blind, multi centre, placebo controlled, etc.), a detail of the specific treatment groups and number of study Subject in each group and investigative site, Subject number assignment, and the type, sequence and duration of study periods.

b. Flow chart of the study

c. A brief description of the methods and procedures to be used during the study.

d. Discussion of Study design: This discussion details the rationale for the design chosen for this study.

5. Study Population: the number of Subjects required to be enrolled in the study at the Investigative site and by all sites along with a brief description of the nature of the Subject population required is also mentioned.

6. Subject Eligibility

a. Inclusion Criteria

b. Exclusion Criteria

7. Study Assessments – plan procedures and methods to be described in detail

8. Study Conduct stating the types of study activities that would be included in this section would be: medical history, type of physical examination, blood or urine testing electrocardiogram (ECG), diagnostic testing such as pulmonary function tests, symptom measurement, dispensation and retrieval of medication, Subject cohort assignment, adverse event review etc.

Each visit should be described separately as visit I, Visit 2, etc.

Discontinued Subjects: Describes the circumstances for subject withdrawal, dropouts, or other reasons for discontinuation of subjects. State how drop outs would be managed if they would be replaced

Describe the method of handling of protocol waivers, if any. The person(s) who approves all such waivers should be identified and the criteria used for specific waivers should be provided.

Describe how protocol violations will be treated, including conditions where the study will be terminated for non-compliance with the protocol.

9. Study treatment

a. Dosing schedule (dose, frequency, and duration of the experimental treatment) Describe

the administration of placebos and/or dummy medications if they are part of the treatment plan. If applicable, concomitant drugs(s), their doses, frequency and duration of concomitant should be stated.

b. Study drug supplies and administration: A statement about who is going to provide the study medication and that the investigational drug formulation has been manufactured following all regulations, details of the product stability, storage requirement and dispensing requirement should be provided.

c. Dose modification for study drug toxicity: rules for changing the dose or stopping the study drug should be provided

d. Possible drug interactions

e. Concomitant therapy: the drugs that are permitted during the study and conditions under which they may be used are detailed here. Describe the drugs that a subject is not allowed to use during parts of or the entire study. If any washout period for prohibited medication are needed prior to enrolment, these should be described here.

f. Blinding procedures: A detailed description of the blinding procedure if the study employs a blind on the investigator and / or the subject

g. Unblinding procedures: If the study is blinded, the circumstances in which unblinding may be done and the mechanism to be used for unblinding should be given

10. Adverse Events Description of expected adverse events should be given.

11. Ethical Considerations: Give the Summary of:

    a. Risk/benefit assessment:

    b. Ethics Committee review and communications

    c. Informed consent process

    d. Statement of subject confidentially including ownership of date coding procedures

12. Study Monitoring and Supervision: a description of study monitoring policies and procedures should be provided along with the proposed frequency of site monitoring visits, and who is expected to perform monitoring

Case Record (CRF) completion requirements, including who gets which copies of the forms and any specifics required in filling out the forms CRF corrections requirements, including who is authorized to make corrections on the CRF and how queries about study data are handled and how errors, if any, are to be corrected should be stated.

Investigator study files, including what needs to be stored following study completion should be described.

13. Investigational Product Management

    a. Give Investigational product description and packaging (stating all ingredients and the formulations of the investigational drug and any placebos used in the study)

    b. The precise dosing required during the study

    c. Method of assigning treatments to subjects and the Subject identification code numbering system

    d. Method of assigning treatments to subjects and the subject identification code numbering system

    e. Storage conditions for study substances

    f. Investigational product accountability: Describe instructions for the receipt, storage, dispensation, and return of the investigational products to ensure a complete accounting of all investigational products received, dispensed, and returned /destroyed.

    g. Describe policy and procedure for handling unused investigational products.

14. Data Analysis:

Provide details of the statistical approach to be followed including sample size, how the sample was determined, including assumptions made in making this determination, efficacy endpoints (primary as well as secondary) and safety endpoints.

Statistical analysis: Give complete details of how the results will be analyzed and reported along with the description of statistical tests to be used to analyze the primary and secondary endpoints defined above. Describe the level of significance, statistical tests to be used and the methods used for missing data: method of evaluation of data for treatment failures, non- compliance, and Subject withdrawals: rationale and conditions for any interim analysis if planned.

Describe statistical considerations for Pharmacokinetic (PK) analysis, if applicable

15. Undertaking by the investigators

16. Appendices: Provide a study synopsis, copies of the informed consent documents (patients

information sheet, informed consent form etc.): CRF and other data collection forms; a summary of relevant pre-clinical safety information and any other documents in the clinical protocol.

ANNEXURE.7: **FORM III**

Form III

Check list for verification of proposals submitted to Institute Ethics committee (Human studies)

For official use only *Proposal No.*

	Yes	No	NA	Comments
Is all the documentation provided?				
Scientific importance and validity				
1. Will the study lead to improvements in human health and wellbeing or increase knowledge?				
2. If the study is a replication of a previous study, is it justified?				
3. Can the intervention studied be practically implemented?				
4. Is there provision for dissemination of results of the research?				
5. Has the research protocol been approved by a competent body?				
6. Should the study be referred to a technical expert, policy maker or statistical expert? (If YES, please inform the Secretary/ERC as soon as possible, suggesting a suitable person)				
7. Are the objectives stated clearly?				
8. Is the study design appropriate in relation to the objectives?				
9. Are the investigators qualifications, competence and experience appropriate to conduct the study?				
10. Are the facilities at the site adequate to support the study?				
11. Is the manner in which the results of research will be reported and published ethical?				
Assessment of Risks/Benefits				
1. Is the involvement of human participants necessary to obtain the necessary information?				
2. Are the researcher qualifications, competence, and experience suitable to ensure safe conduct of the study?				
3. Is the justification of predictable risks and inconveniences weighted against the anticipated benefits for the research participant and the concerned communities adequately?				
4. Are there any plans to withdraw or withhold standard therapy for the purpose of research and such actions if any justified?				
5. Is there provision for compensation for participants who sustain injuries?				

24

	Yes	No	NA	Comments
6. Have adequate provisions been made for dealing with and reporting adverse effects?				
7. Have adequate provisions been made for safety monitoring and termination of the research project?				
Respect for the dignity of the research participants				
Informed consent				
1. Is the process for obtaining informed consent appropriate?				
2. Are the participants competent to give consent?				
3. Is the justification adequate for the intention to include individuals who cannot consent?				
4. Will dissent be respected?				
5. Is the written and oral information to be given to the research participants appropriate, adequate, complete and understandable?				
6. Do you approve the incentives offered?				
7. Is the consent given voluntarily and not due to deception, intimidation or inducement?				
Confidentiality				
1. Will the researcher collect only the minimum information/samples required to fulfill the study objectives?				
2. Is the privacy of the research participant safeguarded?				
3. Are data/sample storage and disposal procedures adequate?				
Rights of the participants				
1. Is the participant's right to unconditionally withdraw from the research at anytime safeguarded?				
2. Is there provision for participants to be informed about newly discovered risks or benefits during the study?				
3. Is there provision for the subjects to be informed of results of clinical research?				
Fair participant selection				
1. Has the study population been determined, primarily, based on the scientific goals of the study (and not on convenience, ethnicity, age, gender, literacy, culture or economic status)?				
2. Is the selection of participants (inclusion and exclusion criteria) appropriate so that risks are minimized and benefits are maximized and the burden of research equitably distributed?				
3. Does the selection of participants stigmatize any group?				
4. Does selection of subjects favour any group?				

		No	NA	Comments
5. Is the research conducted on vulnerable individuals or groups?				
6. Is the research externally sponsored?				
7. Is the research a community research?				
8. Is the research a clinical trial?				
Responsibilities of the researcher:				
1. Is the medical care to be provided to the research participants during and after the research adequate?				
2. Has the researcher obtained permission from the relevant authorities?				
3. Are there any conflicts of interest, including payments and other rewards?				
4. Are there any other ethical / legal/ social /financial issues in the study?				

Additional Comments:

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Recommendation: Approve [ ] Reject [ ] Conditional Approval (please state the conditions)

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Name of Reviewer:

Signature:

Date:

ANNEXURE.8: **FORM IV (A)**

1. CHECKLIST FOR STUDY SUBJECT'S INFORMED CONSENT DOCUMENTS

1.1 Essential Element:

1. Statement that the study involves research and explanation of the purpose of the research
2. Expected duration of the Subject's participation
3. Description of the procedures to be followed, including all procedures and
4. Description of any reasonably foreseeable risks or discomforts to the subject
5. Description of any benefits to the subject or others reasonably expected from research. If no benefit is expected subject should be made aware of this.
6. Disclosure of specific appropriate alternative procedures or therapies available to the subject.
7. Statement describing the extent to which confidentially of records identifying the subject will be maintained and who will have access to subject's medical records
8. Trial treatment schedule(s) and the probability for random assignment to each treatment (for randomized trials)
9. Compensation and/or treatment(s)available to the subject in the event of trial-related injury
10. An explanation about whom to contact for trial related queries, rights of subjects and in the event of any injury.
11. The anticipated prorated payment, if any, to the subject for participating in the trial
12. Subject's responsibilities on participation in the trial.
13. Statement that participation is voluntary, that the subject can withdraw from the study at any time and that refusal to participate will not involve any penalty or loss of benefits to which the subject is otherwise entitled
14. Statement that there is a possibility of failure of investigational product to provide intended therapeutic effect.
15. Statement that in the case of placebo controlled trial, the placebo administered to the subjects shall not have any therapeutic effect.
16. Any other pertinent information

1.2 Additional elements, which may be required

a. Statement of foreseeable circumstances under which the subject's participation may be terminated by the Investigator without the subject's consent.

b. Additional costs to the subject that may result from participation in the study.

c. The consequences of a subject's decision to withdraw from the research and procedures for orderly termination of participation by subject.

d. Statement that the subject or subject's representative will be notified in a timely manner if significant new finding develop during the course of the research which may affect the subject's willingness to continue participation will be provided.

e. A statement that the particular treatment or procedure may involve risks to the subject (or to the embryo or fetus, if the subject is or may become pregnant), which are currently unforeseeable

f. Approximate number of subjects enrolled in the study

ANNEXURE.9: **Form IV (B)**

Format of informed consent form for Subjects participating in a clinical trial

Informed Consent form to participate in a clinical trial

Study Title:

Study Number:

Subject's Initials_____ Subject's Name _____
Date of birth/Age:_____
Address of Subject
Qualification
Occupation: Student or Self-Employed or Service or Housewife or Others (Please click as appropriate) .

Annual Income of the subject:
Name and address of the nominees and his/her relation to the subject (for the purpose of compensation in case of trial related death).
Please initial Box (Subject)

(i) I confirm that I have read and understood the information sheet dated _____ for the above study and have had the opportunity to ask question. [ ]

(ii) I understood that my participation in the study is voluntary and that I am free to withdraw at any time' without giving any reason. Without my medical care or legal rights being affected. [ ]

(iii) I understand that the sponsor of the clinical trial, others working on the sponsor 's behalf' the Ethics Committee and the regulatory authorities will not need my permission to look at my health records both in respect of the current study and any further research that may be conducted in relation to it, even if I withdraw [ ]

from the trial. I agree to this access. However, I understand that my identity will not be revealed in any information released to third parties or published.

(iv) I agree not to restrict the use of any data or result that arise from this study [ ]

Provided such a use only for scientific purpose(s)

(v) I agree to take part in the above study.

Signature (or Thumb impression of the subject/legally acceptable Representative:_____

Date _____/_____/_____

Signatory's Name: _____

Signature of the Investigator: _____

Study Investigator's Name:_____

Signature of the Witness_____ Date: _____/_____/_____

Signature of the Witness _____Date _____/_____/_____

Copy of the Patient Information Sheet and duly filled Informed Consent Form shall be handed over to the subject his or her attendant.

ANNEXURE.10: **FORM V**

UNDERTAKING BY THE INVESTIGATOR

1. Full name, address and title of the Principal Investigator (or Investigator(s) when there is no Principal Investigator)

2. Name and address of the medical college, hospital or other facility where the clinical trial will be conducted: Education, training & experience that qualify the Investigator for the clinical trial (Attach details including Medical Council registration number, and /or other statement(s) of qualification(s)

3. Name and address of all clinical laboratory facilities to be used in the study.

4. Name and address of the Ethics Committee that is responsible for approval and continuing review of the study.

5. Names of the other members of the research team (Co-or sub-Investigators) who will be assisting the Investigator in the conduct of the investigation (s).

6. Protocol Title and study number (if any) of the clinical trial to be conducted by the Investigator.

7. Commitments:

   (i) I have reviewed the clinical protocol and agree that it contains all the necessary information to conduct the study. I will not begin the study until all necessary Ethics Committee and regulatory approvals have been obtained.

   (ii) I agree to conduct the study in accordance with the current protocol. I will not implement any deviation from or changes of the protocol without agreement by the sponsor and prior review and documented approval / favorable opinion from the Ethics Committee of the amendment, expect where necessary to eliminate an immediate hazard(s) to the trial subjects or when the changes(s) involved are only logistical or administrative in nature.

   (iii) I agree to personally conduct and/or supervise the clinical trial at my site.

   (iv) I agree to inform all trial subject, that the drugs are being used for investigational purposes and I will ensure that the requirements relating to obtaining informed consent and ethics committee review and approval specified in the New Drugs and Clinical Trials Rules, 2019 and Good Clinical Practices guidelines are met.

(v) I agree to report to the sponsor all adverse experiences that occur in the course of the investigation(s) in accordance with the regulatory and GCP guidelines.

(vi) I have read and understood the information in the Investigator' brochure, including the potential risks and side effects of the drug.

(vii) I agree to ensure that all associates, colleagues and employees assisting in the conduct of the study are suitably qualified and experienced and they have been informed about obligations in meeting their commitments in the trial.

(viii) I agree to maintain adequate and accurate records and to make those records available for audit/inspection by the sponsor, Ethics Committee, Licensing Authority or their authorized representative, in accordance with regulatory and GCP provisions. I will fully cooperate with any study related audit conducted by regulatory officials or authorized representatives of the sponsor.

(ix) I agree to promptly report to the Ethics Committee all changes in the clinical trial activities and all unanticipated problems involving risk to human subjects or others.

(x) I agree to inform all serious adverse events to the Central Licensing Authority, sponsor as well as the ethics committee within twenty-four hours of their occurrence. In case, of failure to do so, I shall furnish the reason for the delay to the satisfaction of the Central Licensing Authority along with the report of the serious adverse event.

(xi) The report of the serious adverse event, after due analysis, shall also be forwarded by me to the Central Licensing Authority, the Chairperson of the ethics committee and the Head of the institution where the trial has been conducted within fourteen days in accordance with the regulatory requirements.

(xii) I will maintain confidentially of the identification of all participating study patients and assure security and confidentially of study data.

(xiii) I agree to comply with all other requirement, guidelines and statutory obligations as applicable to clinical Investigator participating in clinical trials.

Signature of Investigator with date

ANNEXURE .11: **Form VI**

DATA ELEMENTS FOR REPORTING SERIOUS ADVERSE EVENTS OCCURRING IN A CLINICAL TRIAL OR BIOAVAILABILITY OR BIOEQUIVALENCE STUDY

1. Patient Details:

Initials and other relevant identifier (hospital or out-patient department (OPD) record number etc)*
Gender
Age or date of birth
Weight
Height

2. Suspected Drug(s):

Generic name of the drug*
Indication(s) for which suspect drug was prescribed or tested.
Dosage form and strength.
Daily dose and regimen (specify units - e.g., mg, ml, mg/kg).
Route of administration.
Starting date and time of day.
Stopping date and time, or duration of treatment

3. Other Treatment(s):

Provide the same information for concomitant drugs (including non-prescription or Over the Counter OTC drugs) and non-drug therapies, as for the suspected drug(s).

4. Details of Serious Adverse Event:

Full description of the event including body site and severity, as well as the criterion (or criteria) for considering the report as serious. In addition to a description of the reported signs and symptoms, whenever possible, describe
a specific diagnosis for the event*
Start date (and time) of onset of event.
Stop date (and time) or duration of event.
Dechallenge and rechallenge information.
Setting (e.g., hospital, out-patient clinic, home, nursing home).

5. Outcome

Information on recovery and any sequelae; results of specific tests or treatment that may have been conducted.
For a fatal outcome, cause of death and a comment on its possible relationship to the suspected event; Any post-mortem findings.
Other information: anything relevant to facilitate assessment of the case, such as medical history including allergy, drug or alcohol abuse; family history; findings from special investigations etc.

6. Details about the Investigator*

Name and Address
Telephone number
Profession (specialty)
Date of reporting the event to Central Licensing Authority:
Date of reporting the event to ethics committee overseeing the site:
Signature of the Investigator or Sponsor

Note: Information marked * must be provided.

ANNEXURE.12: <u>Format for submission of Study Completion reports for Investigators</u>

1. Principal Investigator details

Name

Designation

Department

Email ID

Contact number

2. Study details-

a.Title

b.IEC Number

c.IEC Approval date

d.Sponsor/ Grant agency

e.CTRI number(in case of Clinical Trial):

If not registered, give reason

f.Date of start of study

g.Date of completion of Study

3. Summary of work done (along with results of the study and publications from the study, if any)

4. Serious Adverse Events (SAEs) /any unexpected adverse event

Were all SAEs/ unexpected adverse event reported to IEC

If yes, reference number and dates

(if no, give reason)

Whether reports of SAEs at other sites have been submitted

to the IEC IGMC Shimla

5. **Protocol amendments (if any)**

Were these amendments approved by the IEC

(if no, give reason).

6. **Protocol violations**

Any major protocol violations (if any)

If yes, were they reported to IEC

(if no, give reason)

7. **Annual Reports submitted regarding the study** (reference no. and dates)

8. Signature of PI with date

ANNEXURE.13. Format for submission of Annual Progress Report for investigators

1. Principal Investigator details

Name
Designation
Department
Email ID
Contact number

2. Study details-

a.Title
b.IEC Number
c.IEC Approval date
d.Sponsor / Grant agency
e. CTRI number(in case of Clinical Trial):
If not registered, give reason
f.Date of start of study
(if not started, give reason and expected start date)
g. Date of last status report (if submitted)

3. Summary of work done (along with preliminary findings and publications from research if any)
a. Till date
b. Within last one year

4. Serious Adverse Events (SAEs) /any unexpected adverse event

Were all SAEs/ unexpected adverse event reported to IEC
If yes, reference number and dates
(if no, give reason)
Whether reports of SAEs at other sites have been submitted to the IEC IGMC Shimla

5. Protocol amendments within last one year (if any)

Were these amendments approved by the IEC
(if no, give reason)

6. Protocol violations within last one year

Any major protocol violations (if any)
If yes, were they reported to IEC (reference number and dates)
(if no, give reason)

7. New information

Any new information that can alter the risk/benefit assessment
(If yes, give details)

8. Other issues within the last 1 year

Any issues that PI wishes to report to IEC
(change of Co-I, addition/deletion of sites, etc.)
If yes, give details

9. Signature of PI with date

ANNEXURE.14.

Format for resubmission of revised protocols/submission of additional documents for Investigators

1. Principal Investigator details
Name
Designation
Department
Email ID
Contact number

2. Study details
Title:

Approval Date and Number (if already approved):

3. Purpose of this submission (e.g. Revised Informed Consent document, Case Report Form; Change in Investigator, Addition/Deletion of sites etc.):

4.Submission details

Sl. No.	Revision/Corrections Suggested by IEC	Corrections done: Yes/No	What correction is done? Mention.

5. New documents being submitted:

Name of document-Modifications/revisions made in the new document (kindly highlight and tag the modifications/ revisions)
Or

Details about any new information being provided to the IEC:

5. Signature of PI with date