1.0 Purpose:

To describe the Division of Microbiology and Infectious Diseases (DMID) policy for reviewing protocols and protocol-related documents required for the implementation of clinical trials.

2.0 Scope:

This policy applies to the review of protocols and protocol-related documents required for the implementation of DMID-supported clinical trials under DMID contracts, grants, and cooperative agreements.

3.0 Policy:

All clinical trial protocols will be reviewed by DMID prior to implementation at clinical trial sites. DMID’s review of clinical trial protocols, informed consent forms (ICF), and other supporting documents will ascertain whether the protocol design:

- Has scientific merit and addresses programmatic priorities;
- Is feasible, and appropriate for the scientific question or the stage of product development;
- Is consistent with International Conference for Harmonisation (ICH) guidelines for Good Clinical Practice (GCP); and
- Addresses human subjects protections.

The review will also assess whether the protocol and supporting documents are in compliance with Federal, NIH, NIAID, and DMID regulations and guidances, and other requirements, as appropriate. The review process will also assess the internal consistency and completeness of the protocol and supporting documents.

DMID will review all protocols and will review and approve the following:

- Protocols where DMID is the responsible party;
- Protocols under Investigational New Drug Application (IND) or Investigational Device Exemption (IDE);
- Protocols under a DMID clinical contract.

Refer to Attachment A, “Review Responsibilities for Protocols and Related Documents”, which describes DMID’s review responsibilities according to the DMID funding mechanism and resource tiering.

4.0 Background:

DMID protocol review is an integrated process incorporating staff with different areas of expertise. The Program Scientific Leads from DMID Scientific Branches will assess and decide on the merit, scientific feasibility, and programmatic priority of protocols. Program, as the primary contact with the Principal Investigator (PI) and product manufacturer(s), is responsible for distribution of the protocol and supporting documents to other DMID reviewers. DMID is
responsible for consolidating comments from other reviewers within DMID and providing appropriate recommendations to the PI and/or the author of the protocol.

DMID requires protocols to include all required elements listed in the ICH GCP (E6) Guidelines. Although DMID does not require a specific protocol template, DMID has established protocol templates and other tools to help ensure that all the required ICH GCP (E6) elements are addressed in the protocol and/or supporting documents.

5.0 Definitions:

Clinical Trial: A research study in which one or more human subjects are prospectively assigned to one or more interventions (which may include placebo or other control) to evaluate the effects of those interventions on health-related biomedical or behavioral outcomes.

Informed Consent (IC): A process by which a subject voluntarily confirms his or her willingness to participate in a particular trial, after having been informed of all aspects of the trial that are relevant to the subject's decision to participate. Informed consent is usually documented by means of a written, signed, and dated informed consent form (ICF).

Protocol: A document that describes the objective(s), design, methodology, statistical considerations, and organization of a trial as well as provides the background and rationale for the trial.

6.0 Responsibilities:

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of Clinical Research Affairs (OCRA)</td>
<td>Review the protocol and supporting documentation, including amendments, for pharmacovigilance and operational aspects</td>
</tr>
<tr>
<td>Office of Regulatory Affairs (ORA)</td>
<td>Review the protocol and supporting documentation, including amendments, when conducted under IND or IDE</td>
</tr>
</tbody>
</table>
| DMID Scientific Branch                  | • Assert primary responsibility for the scientific review of the protocol, including programmatic priority  
                                           | • Organize and manage review of protocol and related documents, including amendments  
                                           | • Manage communications with the PI and/or the author of the protocol |
7.0 References:

International Conference on Harmonisation (ICH) E6: Good Clinical Practices

Code of Federal Regulations Title 45, Part 46: Protection of Human Subjects

Code of Federal Regulations Title 21, Part 312: Investigational New Drug Application

Code of Federal Regulations Title 21, Part 812: Investigational Device Exemption

8.0 Inquiries:

Questions or comments regarding this policy may be directed to:
Associate Director for Clinical Research
Division of Microbiology and Infectious Diseases (DMID)
NIH / NIAID
5601 Fisher Lane, Rm. 7E60
Bethesda, MD 20892
DMIDPolicyQuery@niaid.nih.gov

9.0 Availability:

This policy is located electronically at:
http://collab.niaid.nih.gov/sites/DMID/clinical/SitePages/protocol.aspx

10.0 Attachments

Attachment A: Review Responsibilities for Protocols and Related Documents

Attachment B: DMID Research Resource Assessment Worksheet

11.0 Change Summary:

<table>
<thead>
<tr>
<th>Version number</th>
<th>Date of Revision: DD/MMM/YYYY</th>
<th>Replaces</th>
<th>Effective Date: DD/MMM/YYYY</th>
<th>Description of Revision/Retirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>N/A</td>
<td>N/A</td>
<td>12-FEB-2016</td>
<td>N/A</td>
</tr>
</tbody>
</table>
## REVIEW RESPONSIBILITIES FOR PROTOCOLS & RELATED DOCUMENTS

<table>
<thead>
<tr>
<th>Resource Allocation Level</th>
<th>Funding Mechanism</th>
<th>Regulatory Category</th>
<th>Using DMID Central Resource</th>
<th>Review By:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Scientific Branch</td>
</tr>
<tr>
<td>Low</td>
<td>Grant</td>
<td></td>
<td></td>
<td>IRB approval adequate</td>
</tr>
<tr>
<td>Contract</td>
<td></td>
<td></td>
<td></td>
<td>● ● ●2</td>
</tr>
<tr>
<td>Medium</td>
<td>Grant</td>
<td>No</td>
<td></td>
<td>● ● ●3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td>● ● ●</td>
</tr>
<tr>
<td></td>
<td>IICT4</td>
<td>No IND/IDE</td>
<td></td>
<td>● ● ●</td>
</tr>
<tr>
<td></td>
<td></td>
<td>IND/IDE</td>
<td></td>
<td>● ● ●</td>
</tr>
<tr>
<td></td>
<td>Contract</td>
<td>No IND/IDE</td>
<td></td>
<td>● ● ●</td>
</tr>
<tr>
<td></td>
<td></td>
<td>IND/IDE</td>
<td></td>
<td>● ● ●</td>
</tr>
<tr>
<td>High</td>
<td>IICT</td>
<td>No IND/IDE</td>
<td></td>
<td>● ● ●5</td>
</tr>
<tr>
<td></td>
<td></td>
<td>IND/IDE</td>
<td></td>
<td>● ● ●5</td>
</tr>
<tr>
<td></td>
<td>Contract</td>
<td>No IND/IDE</td>
<td></td>
<td>● ● ●</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DMID IND/IDE</td>
<td></td>
<td>● ● ●</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Non-DMID IND/IDE</td>
<td></td>
<td>● ● ●</td>
</tr>
</tbody>
</table>

---

1. Medical Officer may be assigned from Scientific Branch or OCRR
2. At the request of the Contract Officer’s Representative (COR)
3. One-time, non-binding, consultative review by Medical Officer, Human Subjects Protection Specialist, and/or Nurse Consultant at Program Officer’s (PO) request. Appropriate Subject Matter Experts can always be available at the request of the COR, Clinical Project Manager, or PO, depending on the funding mechanism.
4. Investigator-Initiated Clinical Trial (IICT)
5. Mandatory, one-time, non-binding, consultative review within PRT by standard process
Attachment B

Resource Assessment Worksheet *
DMID-CROMS

* Please note this form may only be used as a worksheet and may not be submitted to CROMS to request a Protocol Number in lieu of the web based submission form on the DMID-CROMS website.

Pl Name: ____________________  Award Number: ____________________  Date: ____________________

1. Does the protocol contain a risky procedure?  Yes = 2  No = 0  ______

2. Is this study an Intervventional study?  Yes = 1  No = 0  ______

2a. If this study is an interventional study, is non-routine care provided?  Yes = 1  No = 0  ______

2b. Is the product in this study investigational (unlicensed product)?  Yes = 2  No = 0  ______

2c. For a licensed product, is the indication NOT approved?  Yes = 1  No = 0  ______

3. Is there a subject who CANNOT freely give consent for him/herself?  Yes = 1  No = 0  ______

4. Are there reasons, in program's opinion, that this study merits additional DMID resources?  Yes = 2  No = 0  ______

Total Resource Score Legend:
Total Resource Score 0-1 = Low Resource
Total Resource Score 2-3 = Medium Resource
Total Resource Score 4 = High Resource

Primary Scorer:  ____________________  Date:  ______
Secondary Scorer:  ____________________  Date:  ______

version 3.0
25 September 2009