Institutional Review Board



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Checklist: Tissue Banking

IC for Collection and Storage of Human Tissue or Specimens for Future Research

NUMBER | HRP-420

IRB Number				
Abbrev. Protocol Name		obrev. Protocol Name		
		Investigator		
A. Banking considerations (Check all that apply.)				
	1.	This study involves specomponent.	cimen collection and storage for future research either as its primary purpose or as an optional	
	2.	There is a separate optional tissue banking IC, or within the main IC there is a separate section for the optional tissue banking. (Note: for a tissue banking study, the tissue banking ICF = the main ICF) N/A: □		
B.	3. The following information should be included in the ICF regarding banking (Check all that apply.)			
	1.	What is being collected	A description of the tissue (or specimens) to be collected.	
	2.	How is it being collected: A description of how the tissue (or specimens) will be collected.		
	3.		bjects to record their choices about participating in tissue banking.	
		•		
	4.	of the underlying clinica underlying clinical trial,	If the collection of samples involves additional procedures to those that would be performed as part I trial, or involves the collection of samples in a greater volume than would be collected as part of the an explanation of the additional risks, if any. N/A: □	
	5.	Tissue banking is optional: A statement that the subject's agreement to the collection of specimens (and protected health information (PHI), if applicable) for transfer to a tissue bank is not a condition for enrollment in this or any research study, or for future care or treatment, and that a subject can participate in the main study and not be part of the optional specimen banking component of the study. N/A, this study is only for tissue banking: □		
	6.	A description of the mea	asures that will be taken to guard against loss of privacy and confidentiality.	
	7.	Intended future use(s) of	of the specimens: A description of:	
		(a) The types of invest(b) The purposes for wThe IC is to describe the	igators or entities to whom the samples (and PHI, if applicable) may be distributed, and which the samples (and PHI, if applicable) may be used. In the intended future use(s) of the specimens (and PHI, if applicable) with as much specificity as possible.	
	8.	consent at any time to f	e samples (and PHI, if applicable) will be coded, a statement that the subject is able to withdraw uture use, except where it is impossible to achieve the withdrawal because the tissue bank has samples, the samples have been completely exhausted, or the code to match the sample to the ilable.	
	9.		tho to contact to withdraw: If the samples will be coded, a statement indicating who to contact if the subject wishes to the future use of the samples.	
	10.	Risks: A statement that a risk of storing samples for future research includes possible loss of confidentiality and, if genetic testing is part of the protocol, a statement to the effect that the results of genetic tests, if inadvertently disclosed, could negatively affect access to insurance or employment, or could have an impact upon family or social relationships.		
	11.	secondary recipients of	acted by the tissue bank: A statement that the subject will not be contacted by the tissue bank or by the stored specimens. However, if the IRB does allow such contact, the ICF should state the nich such contact may occur. N/A:	
	12.		f applicable, a statement that the specimens may be used in the development of commercial products ent of cell lines and whether the subject will receive any benefit/monetary gain from this development.	
		specimen banking comp	ent addressing whether or not the subject will receive any direct benefit from participation in the conent of the research protocol.	
		be communicated to the record. If so If res care doctor, or placed in information must be des	, , ,	
		or other remuneration from payment is intended so	ration: If applicable, an explanation that Avera, or a member of the research team will receive money om the tissue bank for the collection or use of the samples. No explanation is necessary if the lely as reimbursement for the direct costs of the collection of the materials and transfer to tissue bank.	
	16.	If so, the ICF may include ☐ An expiration date or	entifiable PHI accompany the specimen supplied to a tissue bank? de: expiration event for the potential research to be performed on the subject's samples and PHI; ng the particular identifiers (PHI) that will be disclosed to the tissue bank.	

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	At this time I recommend the research be: (Please check one, and sign/date)				
	APPROVED. Approved with Conditions, Minor Clarifications and/or Modifications back to the IRB Office. Note conditions below Approved with Conditions, Major Clarifications and/or Modifications back to the Full IRB Meeting. Note conditions below Do Not Recommend approval at this time. List Reasons. (Convened board must agree by a vote if study is not approved.)				
Comments Section:					
	Name	Date			