Coordinating Center Application

DIRECTIONS FOR INITIAL SUBMISSION

Initial Submissions

- (a) Coordinating Center Application
 - For eProtocol submissions attach a copy of this form to the Study Location section. Label the Form as Coordinating Center Application with date.
- (b) IRB approval letter from additional sites or reliance agreement if WSU is the IRB of Record.
- (c) Any other documentation

VA Submissions include copy of Coordinating Center Application and email to eIRBManager@wayne.edu

Applications can be submitted to the IRB Administration Office at any time.

DIRECTIONS FOR AMENDMENT SUBMISSION

Full Board Amendment Submissions

- (a) Coordinating Center Application and the Amendment Submission Form
 - For eProtocol submissions attach a copy of this form to the Study Location section. Label the Form as Coordinating Center Application with date of form.
- (b) IRB approval letter from additional site; IRB approval memo must be within twelve months

All other Amendment Submissions

- (c) Coordinating Center Application and the Amendment Submission Form
- (d) IRB approval letter from additional site; IRB approval memo must be within twelve months Applications can be submitted to the IRB Administration Office at any time, unless full board—refer to deadlines on website.

DIRECTIONS FOR CONTINUATION SUBMISSION

All Continuation Submissions

- (a) Coordinating Center Application and the Continuation Form
 - For eProtocol submissions attach a copy of this form to the Study Location section. Label the Form as Coordinating Center Application with date of form.
- (b) IRB approval letter from additional sites; IRB approval memo must be within twelve months Please complete and submit this form by the date indicated on the IRB protocol specific approval letter. This date will be approximately six weeks before the expiration date of the protocol

Open and save form using Adobe or software that allows for digital signature.

Instructions: Steps for Signing a PDF Form with a Digital ID

For Non-eProtocol Submissions:

Place the Coordinating Center Form along with all other submission forms and supporting documents in a single zip file and email to: eIRBManager@wayne.edu

Email Subject Line should indicate the type of submission, PI's Name, and IRB Number

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IRB Administration Office

87 E. Canfield, Second Floor Telephone# (313) 577-1628 Detroit, MI 48201 http://irb.wayne.edu/index.php

Coordinating Center Application

- This additional application form must be submitted to the IRB office for all projects where WSU/WSU affiliate is to serve as the Coordinating Center for a multicenter Research Project
- Digital Signatures are required for the PI and Authorized Signatory
- *Forward your @wayne.edu e-mail to your @med.wayne.edu, @karmanos.org, etc. e-mail in order to receive important e-mail communications regarding your study if you do not access your @wayne.edu e-mail OR go to Academica and enter the e-mail account that you wish to use. Non-WSU employees, please enter your e-mail.
- Please call us if you have any questions along the way: (313) 577-1628

		ļ	RB Number_		IRB Use ONLY		
		☐ Initial Application	<u> </u>		Continuation		
Name of PD/PI			Department				
PD/PI's Signature					Click on box to sign		
	Open and	save form using Adobe	or software th	at allows fo	or digital signature.		
Address	- Сроп апа	out of the desired states of the desired sta	Pager		or anguar organica		
			*E-Mail		_		
			Telephone				
Form Comple By	ted		Date Form Completed				
Telephone			*E-Mail				
IRB Number	•	ct Information					
	Name of PD/PI PD/PI's Signature Address Form Comple By Telephone IRB Number	Name of PD/PI PD/PI's Signature Open and Address Form Completed By Telephone	Type of Submission: Initial Application ction A: Project Director (PD)/ Principal Name of PD/PI PD/PI's Signature Open and save form using Adobe Address Form Completed By Telephone ction B: Grant/Project Information IRB Number	Type of Submission: Initial Application Amend Stion A: Project Director (PD)/ Principal Investigato Name of PD/PI PD/PI PD/PI's Signature Open and save form using Adobe or software the Address Pager *E-Mail Telephone Form Completed By Telephone *E-Mail Telephone Stion B: Grant/Project Information IRB Number	Type of Submission: Initial Application Amendment Stion A: Project Director (PD)/ Principal Investigator (PI) Name of PD/PI PD/PI's Signature Open and save form using Adobe or software that allows for the second accordance in the second accor		

7.	Expiration Date or Status			
••	Check-In Date			
	(IF NEW SUBMISSION LEAVE BLANK)			
8.	Funding Source:			
	Contact Name:			
	Address:			
	Address.			
	Phone:			
9.	Status of Funds:	☐ Approved☐ Pending		
10.	How many sites are anticipa in this multicenter trial?	ted to participate		
11.	Is this an amendment to a cucenter application?	urrent coordinating	☐ No – go directly to Q#12 ☐ Yes	
		baina mada ta tha a	· 	
	a. State what changes are	being made to the d	coordinating center application:	

12.	Describe the process for the collection, analys	is, and dissemination of data to all sites:
12.		
13.	Is this a research project that could pose	No − go directly to Q#16
10.	potential risk to the participants?	Yes

14.	Describe the organization, function, and membership of the committee used to monitor safety between the various sites and how often the committee meets. (Data safety and monitoring boards, or DSMB, are required for clinical trials involving interventions that could cause harm to participants.)	

15.	Describe the process for reporting adverse events/unexpected problems to participating sites and to the WSU IRB. All sites must be made aware of serious adverse events/unexpected problems that occur at each participating site (See the Unanticipated Problems and other Reportable Events policy)

Section C: Site Information

16.	16. Select only One Option							
			0.0		(110111 (1 100 1			
L	Separate IRB Revie	• •	OR	 •	ew (WSU is the IRB of			
	provided for each site			Record)				
	or individual sites serving as			A reliance agreement is required for this option. Sites can				
	ide the IRB approval letters 3 approval letter has not yet			be added as an amendment upon execution of				
11 (1	Pending"			agreements. If the reliance agreement is not complete				
Tota	al number of sites, inc	cluding sites indica	tod f	select "Pending"				
	ate this number as sites a							
List	all sites below:							
a.	Name of Site:							
	OHRP/FWA Number							
	Name of DI							
	Name of PI							
	Address							
				1				
	Phone			Pl's Email:				
	IRB approval date:			Reliance Agreement	Reliance Agreement Type			
	(attach copy)			☐ Approved	☐ Smart IRB			
	or Pending			Pending	Other:			
				Not Applicable				
b.	Name of Site:							
	OHRP/FWA Number							
	Name of PI							
	Address							
	Phone			Pl's Email:				
	1 Hono			113 Liliuli.				
	IRB approval date			Reliance Agreement	Reliance Agreement Type			
	(attach copy)			☐ Approved	Smart IRB			

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Pending

☐ Not Applicable

Other:

Pending

C.	Name of Site:					
-	OHRP/FWA Number					
	Name of PI					
	Address					
	Phone		Pl's En	mail:		
	IRB approval date: (attach copy) or		☐ App		Reliance Agreement Type Smart IRB Other:	
	Pending		☐ No	t Applicable		
d.	Name of Site:					
	OHRP/FWA Number					
	Name of PI					
	Address					
	Phone		Pl's Em	ail:		
	IRB approval date: (attach copy)		Relianc	e Agreement roved	Reliance Agreement Type Smart IRB	
	or		Pen		Other:	
	Pending			Applicable		
e.	Name of Site:					
	OHRP/FWA Number					
	Name of PI					
	Address					
	Phone		Pl's Em	ail:		
	IRB approval date: (attach copy)		Relianc	e Agreement roved	Reliance Agreement Type Smart IRB	
	or		Pen		Other:	
	Pending			Applicable		

Name of Site:				
OHRP/FWA Number				
Name of PI				
Address				
Phone		Pl's Email:		
IRB approval date: (attach copy) or Pending		Reliance Agreement Approved Pending Not Applicable	Reliance Agreement Type Smart IRB Other:	
Name of Site:		Тост, фриосия	<u>I</u>	
OHRP/FWA Number				
Name of PI				
Address				
Phone		Pl's Email:		
IRB approval date: (attach copy) or Pending		Reliance Agreement Approved Pending Not Applicable	Reliance Agreement Type Smart IRB Other:	
	OHRP/FWA Number Name of PI Address Phone IRB approval date: (attach copy) or Pending Name of Site: OHRP/FWA Number Name of PI Address Phone IRB approval date: (attach copy) or	OHRP/FWA Number Name of PI Address Phone IRB approval date: (attach copy) or Pending Name of Site: OHRP/FWA Number Name of PI Address Phone IRB approval date: (attach copy) or (attach copy) or	OHRP/FWA Number Name of PI Address Phone Pl's Email: Reliance Agreement Approved Pending Pending Name of Site: OHRP/FWA Number Name of PI Address Phone Pl's Email: Reliance Agreement Approved Pending Not Applicable Pi's Email: Reliance Agreement Approved Reliance Agreement Approved Pending Pi's Email: Reliance Agreement Approved Pending Pi's Email:	

Not enough spaces? Use and attach the Coordinating Center Additional Site Addendum

IRB Administration Office Note:

Note to IRB Reviewer: Please complete the IRB Coordinating Center Reviewer Checklist. Contact the IRB Administration Office for assistance or questions.

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