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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ORDERS FOR NEEDED EQUIPMENT, ANIMALS, DRUGS, SUPPLIES** | | | | | | | | |
| Order: (Expected Delivery \_\_ weeks) |  |  | |  | |  |  | |
| Order: (Expected Delivery \_\_ weeks) |  |  | |  | |  |  | |
| Order: (Expected Delivery \_\_ weeks) |  |  | |  | |  |  | |
| Order: (Expected Delivery \_\_ weeks) |  |  | |  | |  |  | |
| Order: (Expected Delivery \_\_ weeks) |  |  | |  | |  |  | |
| Please include, in detail, any problems that have been encountered which have affected either the supply or receipt of any of the above supplies: | | | | | | | | |
| **MATERIAL TRANSFER AGREEMENTS**  [**Material transfer agreements**](https://ventures.jhu.edu/technology-transfer/material-transfer-agreements/) (MTAs) are binding legal agreements between the provider of research material and the recipient, which outline the rights and obligations (i.e. rights of publication, inventorship, liability, etc.) of parties exchanging tangible and intangible research material.  All transfers of research material in and out of Johns Hopkins University need to be memorialized by a MTA. To initiate MTAs that are associated with **any of the following three categories , the appropriate research administration office (listing follows below) is contacted:**   * A sponsor-controlled research study * A funded or unfunded collaborative study between Johns Hopkins School of Medicine and the provider of the materials * **Research involving patients or protected health information (PHI), clinical testing or procedures or drug/device testing in humans or any planning/lab/clinical service in support of such clinical research**   **Depending on your primary affiliation, the Johns Hopkins University Research Administration Office that should be contacted is:**   * [**School of Medicine (ORA)**](https://www.hopkinsmedicine.org/research/resources/offices-policies/ora/) * [**Krieger School of Arts and Sciences (BARA)**](https://sites.krieger.jhu.edu/kasper/sponsored-projects/) * [**All Other Schools (JHURA)**](https://research.jhu.edu/jhura/)   **MTAs that are connected to any other situation besides the ones listed above are reviewed by** [**JH Technology Ventures**](https://ventures.jhu.edu/technology-transfer/material-transfer-agreements/) **.**  **[ NOTE: MTAs can take 4-8+ weeks to obtain]** | | | | | | | | |
| MATERIAL TRANSFER AGREEMENT |  |  |  | | |  | |  |
| **BIOSPECIMEN TRANSFER INFORMATION SHEET**  If the material around which an MTA is focused is a human tissue sample collected at Johns Hopkins, including associated data or immortalized cell lines derived from human tissue samples, **a** [**Biospecimen Transfer Information Sheet**](https://www.hopkinsmedicine.org/institutional_review_board/forms/Outbound_biospecimen_transfer_infosheet.pdf) **must be completed and emailed to** [**MTA@jhu.edu**](mailto:MTA@jhu.edu)**.** | | | | | | | | |
| BIOSPECIMEN TRANSFER INFORMATION SHEET |  |  | |  | |  |  | |
| **DATA USE AGREEMENTS**  A “limited data set” is a limited set of identifiable patient information as defined in the Privacy Regulations issued under HIPAA. A [**“limited data set**](https://www.hopkinsmedicine.org/institutional_review_board/hipaa_research/limited_data_set.html)” of information may be disclosed to an outside party without a patient’s authorization if certain conditions are met. First, the purpose of the disclosure may only be for research, public health or health care operations. Second, the person receiving the information must sign a data use agreement **(DUA)** with Hopkins. This agreement has specific requirements which are discussed [**here**](https://www.hopkinsmedicine.org/institutional_review_board/hipaa_research/limited_data_set.html)**.**  **If you have questions about whether or not a Data Use Agreement (DUA) is required for your project or to initiate a DUA for your project, please contact** [**ORA**](https://www.hopkinsmedicine.org/research/resources/offices-policies/ora/index.html) **or JHURA** [**jhura@jhu.edu**](mailto:jhura@jhu.edu)**.** | | | | | | | | |
| DATA USE AGREEMENT |  |  | |  | |  |  | |
| **INSTITUTIONAL REGULATORY APPROVALS\***  Regulatory approvals are not required to be in place at the time of ATIP application submission. However, for applicable awarded projects requiring submission of a prior approval request to NCATS (***See Appendix I of the RFA for additional information)***, that process cannot be initiated until **IRB and/or ACUC approvals have been obtained. Projects requiring NCATS review and approval include those involving** [**human subjects research**](https://ctsa.ncats.nih.gov/wp-content/uploads/2020/04/NCATS-New-Projects-with-Human-Subjects-Research-Addendum-and-Instructions-for-PIs-and-SOs-v1.0-03.27.2020.docx) **and/or** [**vertebrate animals**](https://ctsa.ncats.nih.gov/wp-content/uploads/2020/10/NCATS-CTSA-Program-Instructions-for-Submitting-Prior-Approval-Requests-of-Planned-Research-Involving-Live-Vertebrate-Animals-10.05.2020.docx). In light of the accelerated nature of this program, investigators are **strongly encouraged** to initiate necessary approvals prior to grant submission. | | | | | | | | |
| **INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE APPROVAL:** | | | | | | | | |
| [**REVISION OF AN EXISTING ACU PROTOCOL**](http://web.jhu.edu/animalcare/policies/Significant%20Changes%20to%20Previously%20Approved%20Animal%20Activity.docx)**\***  *(\*Please review ACUC Office information linked here)* |  |  | | |  |  | |  |
| NEW ACU PROTOCOL |  |  | | |  |  | |  |
| **INSTITUTIONAL REVIEW BOARD APPROVAL OF HUMAN SUBJECTS RESEARCH** | | | | | | | | |
| REVISION AN EXISTING IRB APPLICATION |  |  | | |  |  | |  |
| NEW IRB APPLICATION |  |  | | |  |  | |  |
| **If approval is also required by an outside and /or a single IRB (e.g. DoD HRPO, international site Independent Ethics (IE) Committee approval), please explain here including approximate submission and review timelines.** | | | | | | | | |
| **INSTITUTIONAL STEM CELL RESEARCH OVERSIGHT**  It is the policy of the Johns Hopkins University School of Medicine that some types of research involving human pluripotent stem cells (hPSCs) being conducted by JHU faculty, staff or students or involving the use of JHU facilities or resources shall be subject to oversight by the **JHU Institutional Stem Cell Research Oversight (ISCRO) Committee**.  More information regarding covered research can be found [**here.**](https://www.hopkinsmedicine.org/institutional_review_board/guidelines_policies/organization_policies/102_4.html) | | | | | | | | |
| ISCRO APPROVAL |  |  | | |  |  | |  |
| **CLINICAL ENGINEERING CLEARANCES**  The Johns Hopkins Hospital (JHH) and the Johns Hopkins Bayview Medical Center (JHBMC) follow JCAHO requirements for environment of care and safety of equipment used at the facilities. In addition, the Hospitals are required to conduct acceptance testing of all equipment that comes into contact with patients. In order to meet the JHH and JHBMC policy requirements, JHM established Clinical Engineering Services (CES) at JHH and JHBMC to assure that the appropriate review, safety inspection, testing, reporting, and documentation required for equipment has been met before equipment is used or installed at JHM. The requirement for equipment testing applies to both clinical **care and to research related procedures.**  [**All applicable equipment, software, and devices**](http://www.hopkinsmedicine.org/institutional_review_board/guidelines_policies/guidelines/clinical_engineeringservices.html) **provided to an investigator by a sponsor or vendor require CES review before the IRB may issue final approval of a protocol that involves either a marketed or investigational device or equipment.** The eIRB application contains questions to assist investigators in submitting information regarding equipment/devices that will require CES review and subsequent IRB approval. | | | | | | | | |
| CLINICAL ENGINEERING CLEARANCE |  |  | | |  |  | |  |
| **RADIATION SAFETY AND USE OF RADIOACTIVE MATERIALS**  The use of radioactive materials by personnel at JHMI is authorized by a radioactive materials license issued by the Maryland Department of the Environment. **The Radiation Control Committee (RCU) is the review body which certifies the responsible investigator and facilities to be used for each radioactive nuclide**. Application for an authorization to use radioactive material is made through the RCU, Ext. 5-3710.  **The JHMI Radiation Safety Manual contains a copy of the form which must be completed and the current institutional policies regarding radioactive materials.  Forms for projects that involve radiation exposure to human subjects are available at**[**http://irb.jhmi.edu/Forms/index.html**](http://irb.jhmi.edu/Forms/index.html) **The manual may be obtained at [www.hopkinsmedicine.org/hse/forms/forms.html.](http://www.hopkinsmedicine.org/hse/forms/forms.html.)**  All applications for such use shall be submitted to the [**Radiation Control Committee through the Radiation Safety Officer**](https://www.hopkinsmedicine.org/hse/radiation_safety/)**.** Radioactive materials, including what are sometimes called exempt quantities, shall not be used within the JHMI without prior approval of the Committee. **Please contact the Radiation Safety Office at (410) 955-3710 for questions or assistance**.  For applicable human studies, this review will be conducted concurrently with IRB review and will be needed before IRB approval is issued. | | | | | | | | |
| [**RADIATION CONTROL COMMITTEE**](https://www.hopkinsmedicine.org/hse/radiation_safety/index.html)[**AUTHORIZATION**](https://www.hopkinsmedicine.org/research/resources/offices-policies/ora/handbook/handbook_IVa.html) |  |  | | |  |  | |  |
| [**CRRC/RDRC**](https://www.hopkinsmedicine.org/institutional_review_board/guidelines_policies/organization_policies/103_21.html) APPROVAL |  |  | | |  |  | |  |
| [**INSTITUTIONAL BIOSAFETY COMMITTEE**](https://www.hopkinsmedicine.org/hse/ibc/regtype2.html)  Investigators at JHU who use or possess Recombinant or Synthetic Nucleic Acid Materials, Potential Infectious Agents/Pathogens, Biological Toxins, and/or Human-derived tissues and/or body fluids are responsible for registering these [research materials](http://www.hopkinsmedicine.org/hse/ibc/regtype2.html) with the Biosafety Office and describing the research programs and procedures in which they will be used. This rule applies to all independent investigators. **Collaborators may not "piggy-back" on each other's registrations.** Postdoctoral or Clinical fellows, graduate or undergraduate students, and research associates are covered by the registrations of their Principal Investigator. **Please contact the Institutional Biosafety Office at** [**ibc@jhmi.edu**](mailto:ibc@jhmi.edu) **or call (410) 955-5918 for questions or assistance.**  For applicable human studies, this review will be conducted concurrently with IRB review and will be needed before IRB approval is issued. | | | | | | | | |
| INSTITUTIONAL BIOSAFETY REGISTRATION |  |  | | |  |  | |  |
| **COVID-19 RELATED RESEARCH PROPOSAL REVIEW COMMITTEES**   * All studies requiring **any manner of contact** (e.g. therapeutic studies, surveys, etc.) with COVID+ patients (including JH HCW, JH employees, JH students, etc.) must be submitted for review and approval by the COVID-19 Clinical Research Coordinating Committee (CRCC) **before they may be submitted to the IRB.**   **NOTE:** Studies requiring use of outpatient COVID CRU space for COVID-19 Infected and/or PUI Study Participants, must first contact this facility at [COVID19ResearchCtr@jhmi.edu](mailto:COVID19ResearchCtr@jhmi.edu) before submitting a proposal for committee review (see the **Clinical Research Units**  section below).   * All studies requesting **access to serum, plasma, or other biospecimens from COVID-19 + patients** must be submitted for review and approval by the COVID-19 Biospecimen Committee **before they may be submitted to the IRB.** * All studies requiring access to, analysis and/or interpretation of EMR and research data for patients with suspected or confirmed COVID-19 syndrome within the entire Johns Hopkins Health System must be submitted for review and approval by CADRE **before they may be submitted to the IRB**.   **See links provided below for information about the purpose of these reviews and how to submit project to the individual committees. Please contact the ICTR Research Navigators at** [**ICTR\_Navigators@jhmi.edu**](mailto:ICTR_Navigators@jhmi.edu) **with any questions.** | | | | | | | | |
| [**COVID-19 Clinical Research Coordinating (CRCC) Committee**](https://ictr.johnshopkins.edu/coronavirus/covid-johns-hopkins-clinical-research-coordinating-committee/)[**Approval**](https://ictr.johnshopkins.edu/wp-content/uploads/JH-COVID-Research-Plan-Form-3-23-20.pdfhttps:/ictr.johnshopkins.edu/wp-content/uploads/JH-COVID-Research-Plan-Form-3-23-20.pdf) |  |  | | |  |  | |  |
| [**COVID-19 Biospecimen Committee**](https://ictr.johnshopkins.edu/coronavirus/biospecimencommittee/) [**Approval**](https://ictr.johnshopkins.edu/wp-content/uploads/COVID19-Biospecimen-Request-Form-7-21-20.docx) |  |  | | |  |  | |  |
| [**COVID-19 & Data Research Evaluation (CADRE) Committee**](https://ictr.johnshopkins.edu/coronavirus/cadre/)[**Approval**](https://ictr.johnshopkins.edu/wp-content/uploads/COVID-Data-Request-Process-EV4.pdf) |  |  | | |  |  | |  |
| **CLINICAL RESEARCH UNITS**  All investigators must submit an application to a Johns Hopkins Institutional Review Board (IRB) before beginning their ICTR [**Clinical Research Units**](https://ictr.johnshopkins.edu/service-reqs/service-requests/service-request-clinical-research-unit-cru-online/) (CRUs) application.  **NOTE**: COVID + individuals and persons under investigation for COVID-19 infection may ONLY be seen in the designated outpatient COVID CRU spaces at Green Spring Station and/or Bayview. If your project will require use of the COVID CRU spaces, you must contact [**ICTRCovidcru@jhmi.edu**](mailto:ICTRCovidcru@jhmi.edu) **BEFORE** submitting your proposal to the CRCC or your IRB and/or CRU application.  **NOTE:** Obtaining CRU review and approval can add several weeks to your clinical research timeline. | | | | | | | | |
| [**CRU SUBMISSION**](https://ictr.johnshopkins.edu/programs_resources/programs-resources/clinical-research-units/applying-to-use-the-crus/)  *(For COVID-19 negative/NON-PUI Study Participants* ***only****)* |  |  | | |  |  | |  |
| [**COVID CRU SUBMISSION**](https://ictr.johnshopkins.edu/programs_resources/programs-resources/clinical-research-units/covid-19-cru/)  *(For COVID-19 Infected* and*/*or *PUI Outpatient Study Participant*s **only***)* |  |  | | |  |  | |  |
| **STATE AND FEDERAL REGULATORY APPROVALS AND CLEARANCES**  Regulatory approvals are not required for ATIP application submission, however, in light of the accelerated nature of this program, investigators are strongly encouraged to initiate any necessary approvals prior to grant submission***.*** | | | | | | | | |
| **FDA OVERSIGHT OF INVESTIGATIONAL DRUG AND DEVICE RESEARCH**  The FDA Centers for Drug Evaluation and Research (CDER), Biologics Evaluation and Research (CBER) and Devices and Radiological Health (CDRH) collectively oversee both development of new investigational drugs, biologics and devices as well as ‘off label use’ of approved drugs, biologics and devices in clinical research. | | | | | | | | |
| NEW IND/IDE APPLICATION |  |  | | |  |  | |  |
| IND/IDE AMENDMENT TO EXISTING IND/IDE |  |  | | |  |  | |  |
| IND EXEMPTION REQUEST |  |  | | |  |  | |  |
| NSR/SR DETERMINATION REQUEST |  |  | | |  |  | |  |
| Please include any pertinent details regarding the status of any FDA submissions below (e.g. Pre-IND meeting already scheduled, etc.) | | | | | | | | |
| **SUBCONTRACTS**   * + - If an entity external to JHU will be performing substantive program work, have responsibility for making programmatic decisions, have a key role in the ATIP proposal, will have responsibility for compliance with federal program requirements, or other significant contributions, a subcontract may be required for compensation for work performed.     - **NOTE:** Applicants with questions about the need for a subcontract or with projects they know will require a subcontract should contact the ICTR Financial Office at[**ICTRFinance@jhmi.edu**](mailto:ICTRFinance@jhmi.edu) or the Research Navigators at[**ICTR\_Navigators@jhmi.edu**](mailto:ICTR_Navigators@jhmi.edu) as soon as possible **PRIOR** to submission of their ATIP application in order to obtain **authorization and instruction for preparation of their subcontract budget**. * If authorized, the subcontract may be subject to certain restrictions (e.g. inclusion of IDC from subcontracted institution, subcontract budget is no more than 50% of total requested ATIP funds, etc.). * If authorized, the total requested funds (**including subsite indirects, if applicable**) for the subcontract must be listed in the overall project budget. **A separate budget specific to the subsite must ALSO be submitted with the overall ATIP budget along with a separate justification, and scope of work for the subsite. Subcontracts are set up through ORA.** | | | | | | | | |
| SUBSITE JUSTIFICATION |  |  | | |  |  | |  |
| SUBSITE DETAILED SCOPE OF WORK TO BE PERFORMED |  |  | | |  |  | |  |
| SEPARATE SUBSITE BUDGET WITH INDIRECTS |  |  | | |  |  | |  |
| **PURCHASE ORDERS**  Activities such as purchase of equipment, supplies, and even services from entities outside of JHU (where the contributions of the supplier of those goods and services does not meet the definition of a subcontractor) may be paid for via Purchase orders (PO). POs are set up through JH Purchasing Department. Please note that purchase orders with aggregate totals of $5000 or more are subject to the [**JH SOM Competitive Bidding Policy.**](https://www.hopkinsmedicine.org/supply-chain/policies-and-procedures/jhhs-competitive-bidding-policy.html) Please contact the Research Navigators at[**ICTR\_Navigators@jhmi.edu**](mailto:ICTR_Navigators@jhmi.edu) for any questions. | | | | | | | | |
| DETAILED QUOTE |  |  | | |  |  | |  |
| DETAILED SCOPE OF WORK FOR SERVICE TO BE PERFORMED |  |  | | |  |  | |  |
| ENSURE THAT VENDOR IS APPROVED IN JH SAP SYSTEM |  |  | | |  |  | |  |
| **HIRING/TRAINING OF STUDY TEAM** | | | | | | | | |
| DRAFT JOB/FELLOW DESCRIPTION AND OBTAIN DEPARTMENTAL APPROVAL (AS APPROPRIATE) |  |  | | |  |  | |  |
| POST, INTERVIEW, AND HIRE |  |  | | |  |  | |  |
| REQUIRED TRAINING AND CERTIFICATIONS |  |  | | |  |  | |  |
| **OTHER**  Please add any other approvals or clearances needed for your specific project which were not included in this list in the space below (e.g. pre-written order sets, permissions for importation of human samples from international sites, etc.) | | | | | | | | |
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