The NUS-IRB hopes to keep our researchers updated on the latest ethical issues and problems occurring around the world. This will help us keep abreast of international best practices to ensure that research done in Singapore will be well accepted, scientifically and ethically. These news alerts will be issued as and when incidents are reported.

In This Issue

1. Changes to ethics review process of collaborative research projects under the Cooperative Agreement with NHG DSRB

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RENEWAL OF COOPERATIVE AGREEMENT WITH NHG DOMAIN SPECIFIC REVIEW BOARDS (NHG DSRB) FOR COLLABORATIVE RESEARCH IN SINGAPORE

NUS-IRB is pleased to announce the second renewal of the Cooperative Agreement with the NHG Domain Specific Review Boards (NHG DSRB).

The NUS-IRB and NHG-DSRB first entered into this Cooperative Agreement in October 2005. This Agreement was first renewed in December 2010 for 5 years. In addition to collaborative research with the existing NHG institutions, this Agreement also extends to researchers and staff of the National University Health System (NUHS).

The Cooperative Agreement established IRB review procedures for collaborative research involving the respective institutions. With the Agreement in place, the NUS-IRB will accept the decision from the NHG DSRB and vice versa on research protocols that require ethics review.

Research projects that are reviewed under this cooperative agreement will reduce the need for duplicate ethics review while ensuring that the rights, safety and welfare of human research participants are protected.

Triaging Process

As this Agreement covers collaborative research conducted across specific NUS research sites* and NHG sites**, a triaging mechanism will aid in deciding which research protocols will be reviewed by which Board/IRB based on risk assessment. In general, the NUS-IRB will review human subjects research involving no more than minimal risk while the NHG DSRB will cover those with more than minimal risk. Please note that the final determination shall rest with the Chairman of the respective Boards.

Another key highlight in this renewal will be the revised review scope of NUS-IRB as described in the attached Annex I. For the mentioned two (2) study types of clinical research projects that NUS-IRB may review, two (2) additional forms, i.e. Addendum A1 & A2 will need to be completed before submission to the NUS-IRB. These additional forms may be downloaded from: http://www.nus.edu.sg/irb/forms.html.

* NUS research sites include National University Hospital, National University Cancer Institute Singapore, National University Heart Centre Singapore, NUS Yong Loo Lin School of Medicine, NUS Saw Swee Hock School of Public Health and NUS Faculty of Dentistry.

** NHG research sites would include Tan Tock Seng Hospital, Institute of Mental Health, National Skin Centre and National Healthcare Group Polyclinics.
Please contact the IRB Secretariat at 6516 4311 or 66011310 or email at irb@nus.edu.sg if you require further assistance or information.

About NUS-IRB
NUS Institutional Review Board (NUS-IRB) was established on 1st September 2003. This Board (also referred to as the Research Ethics Committee in some countries) will review, approve and monitor the ethical aspects of all NUS research projects that involve human subjects and human tissues/cells/data. Its main objective is to protect the rights and welfare of human research subjects in research activities conducted by NUS students and researchers.

Visit our website: http://www.nus.edu.sg/irb/
### Annex I – Scope of NUS-IRB Review under Cooperative Agreement

<table>
<thead>
<tr>
<th>Study Types</th>
<th>1. All Questionnaires, Survey and Interview Studies (with no access to medical records and/or departmental databases for recruitment purpose or data collection)</th>
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<td>Except:</td>
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<td></td>
<td>• Existing research studies (such as cohort / longitudinal studies with need to access medical records), which NUS-IRB have already approved. NUS-IRB may continue to review their protocol amendments.</td>
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<td>2. Clinical Studies using retrospectively collected tissues (Anonymized(^1), Coded(^2) and Consented or Wavier of Consent from NUS-IRB obtained, with no prospective access to medical records and/or departmental databases) from the following sources:</td>
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<tr>
<td></td>
<td>a. NUH Tissue Repository (TR);</td>
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<td>b. Left-over, diagnosis tissue samples and where samples are collected by NUHS owner/PI.</td>
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<tr>
<td></td>
<td>c. Pathology paraffin blocks/slides</td>
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<td></td>
<td>d. Lab materials – blood &amp; human materials</td>
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<tr>
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<td>Except:</td>
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<td></td>
<td>• Existing research studies already approved by NUS-IRB (such as research involving (a) tissues from NUH TR, Pathology; (b) already collected samples from DSRB-approved studies, where NUS-IRB may continue to review their protocol amendments which may involve an increase in samples quantity).</td>
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</table>

Please note:

1. NHG DSRB shall review all human subjects research of more than minimal risk conducted any of the study sites, and all other types of human subjects research conducted at any of the study sites, which are not covered by NUS-IRB.

2. All prospective research studies involving access to medical / dental records will be reviewed by NHG DSRB, with the exception of existing research studies (such as cohort / longitudinal studies with need to access medical records), which NUS-IRB have already approved. NUS-IRB may continue to review their protocol amendments.

\(^1\) Anonymized* means that the collected samples have been irreversibly stripped of all identifiers by use of an arbitrary or random alphanumeric code and the key to the code is destroyed, thus making it impossible for anyone to link the samples to the sources. This process does not preclude linkage with existing clinical, pathological, and demographic information before subject identifiers are removed.

\(^2\) Coded* means that the collected samples are unidentified for research purposes by use of a random or arbitrary alphanumeric code but the samples may still be linked to their sources through use of a key to the code available to an investigator or collaborator.

* Source: Sheet 14: NIH Requirements for the Research Use of Stored Specimens and Data (Jun 12, 2006)