University of California, San Francisco  
Helen Diller Family Comprehensive Cancer Center  
Policy and Procedure

PRMS Amendment Submission Policy

PRMS Procedure for Submitting Protocol  
Amendments to the Protocol Review and Monitoring Committee

Purpose

The purpose of this policy is to document the process by which all protocol amendments must be submitted to the Protocol Review and Monitoring Committee (PRMC) for review. The portion of this policy pertaining to institutional (investigator-initiated) clinical research studies is modeled after the CTEP Amendment Request Submission Policy, Version date May 14, 2004; it has been modified to meet institutional standards.

Background

Per the Cancer Center Support Grant (CCSG) Guidelines, it is particularly important for Centers involved in clinical research to establish a mechanism for assuring adequate internal oversight of the conduct of all cancer clinical research studies in the institution or institutions that formally comprise the Center. The focus of the Protocol Review and Monitoring System (PRMS) is on scientific merit, priorities and progress of the clinical research in the Center. At UCSF PRMS functions are carried out by the Site Committees and the Protocol Review and Monitoring Committee (PRMC). All protocols initially requiring PRMC approval must have all amendments reviewed by the PRMC.

Definitions

Protocol amendments are any revisions made to a protocol after it has been submitted to or reviewed by any regulatory body, regardless of the nature of the change, which can be typographical, editorial, administrative, scientific, etc. At the UCSF Helen Diller Family Comprehensive Cancer Center, regulatory bodies include, but are not limited to, the Site Committees, PRMC, the UCSF IRB or IRB of record, Radiation Safety Committee, Biosafety Committee, and the FDA.

Procedures

What Needs to be Submitted to PRMC

All protocol amendments created after initial Site Committee submission but prior to initial PRMC approval must be submitted to the PRMC as part of the Initial Review PRMC submission, as per query instruction from the PRMC Administrator. All
amendments made after initial PRMC approval must be submitted to the PRMC as amendments (Change Reviews), as per this policy.

Protocols exempt from PRMC review do not require amendment review by the PRMC.

Submission Requirements for PRMC

Submission Requirements for All Protocol Types

All protocol amendments should be checked to see if the following have changed:

- Title
- Primary Objective(s)
- Sample Size.

If any of the above have changed, the appropriate OnCore fields must be updated. Regardless of whether or not OnCore changes are required, the submission must include the following documents (which differ depending on the Protocol Type):

Submission Requirements for Industry and National Group Protocols

All industry and national group (cooperative group) protocol amendment applications must contain the following documents:

- The Summary of Changes provided by the sponsor, identifying the changes made to the protocol document.

- An unmarked copy of the revised protocol document which accurately reflects all changes detailed in the Summary of Changes document. The revised protocol document must contain all appendices listed in the Table of Contents, regardless of whether or not they were revised. Exception: if case report forms (CRFs) are identified in the Table of Contents those CRFs do not need to be included, unless the amendment affects the CRFs.

Submission Requirements for Investigator-Initiated Protocols from Outside Institutions

All protocol amendment applications for multicenter investigator-initiated clinical research studies for which UCSF is a participating institution and not considered the coordinating center or sponsor/investigator (i.e., protocol owner) must contain the following documents:

- The Summary of Changes provided by the outside institution (the sponsor-investigator), identifying the changes made to the protocol document. If the outside institution does not supply a Summary of Changes, the UCSF Helen Diller Family Comprehensive Cancer Center template must be used (see Submission Requirements for UCSF Institutional (Investigator-Initiated) Protocols below).
• An unmarked copy of the revised protocol document which accurately reflects all changes detailed in the Summary of Changes document. The revised protocol document must contain all appendices listed in the Table of Contents, regardless of whether or not they were revised. **Exception:** if case report forms (CRFs) are identified in the Table of Contents those CRFs do not need to be included, unless the amendment affects the CRFs.

**Submission Requirements for UCSF Institutional (Investigator-Initiated) Protocols**

All protocol amendment applications for UCSF institutional (investigator-initiated) clinical research studies (those created by a UCSF investigator) must contain the following documents:

• A Summary of Changes which identifies each change made to the protocol document. Each change must be described in a point-by-point format which identifies the page number, section number, specific changes, and a brief rationale for the change (e.g., “Page 5, Section 1.3, original text = ‘abc’, replacement text = ‘xyz’, rationale for change). Page numbers should reflect the clean unmarked copy of the protocol document. (See **Summary of Changes Template**.)

The Summary of Changes must include the prior version information, and the current protocol title, protocol number, and the revised version date and version number (see protocol document discussion below).

• An unmarked copy of the revised protocol document which accurately reflects all changes detailed in the Summary of Changes document. The revised protocol document must contain all of the following:

  ➢ All appendices listed in the Table of Contents, regardless of whether or not they were revised. **Exception:** if case report forms (CRFs) are identified in the Table of Contents those CRFs do not need to be included, unless the amendment affects the CRFs.

  ➢ The version date must be revised. The revised version date will be a single date on which all changes were made to the protocol document.

  **Note:** There is no requirement for the dating of individual editorial or administrative updates within the body of the protocol. Rather, it will be the policy of this institution that all changes made to a specific protocol (i.e., all changes listed on the Summary of Changes document) are understood to have been made at the same time, that is, on the same, single date reflected in the version date. Any changes occurring after that timepoint need to be included in another, future, amendment submission.

  ➢ The protocol document title page must include a history of all version dates (and version numbers if applicable), beginning with the first official version number and date to have undergone any formal regulatory review (e.g.: Version 1.0 = mm/dd/yyyy; Version 2.0 = mm/dd/yyyy; etc.). In general, the
The first official version is the earliest version to have been reviewed at Site Committee. See the HDFCCC Phase I Protocol Template, Phase II Protocol Template, and Behavioral Research Protocol Template.

- The header or footer on each page must reflect the revised version date (and version number if applicable).

- Not required: Use of a version number in conjunction with the required version date is highly recommended, but not required. However, if not currently using version numbers on a previously approved protocol, do not begin to use version numbers with an amendment. If version numbers have been in use from the inception of the project, then the version number must be revised with each amendment. The recommended method of version numbering will be to use 1.0 as the initial version number (the approved ‘Final’ version, i.e., the first non-draft version). Using this recommended method, all amendments would therefore have a version number greater than 1.0. Suggested method is to use whole numbers for all amendments (e.g., 2.0, 3.0, etc.). An alternate method would be to use whole numbers for major amendments (e.g., 2.0, 3.0, etc.), and decimal numbers for minor amendments (e.g., 1.1, 1.2, etc.). Should version numbers be used, the method selected must be used consistently throughout the life of the protocol.

- If the amendment is in response to a request for revision from a collaborator, the FDA, UCSF IRB or IRB of record, or any other regulatory body, a copy of that request for revision document should be included.

How to Submit

All amendments must be submitted within OnCore (the Cancer Center’s secure electronic web-based database) per the directions found in the OnCore Wiki (see Section 7.0 of The Submitter Sends an Amended Protocol for Review).

Incomplete Applications

Incomplete applications will not be reviewed.

Responding to Contingent Approval of an Amendment

The PI’s response to Contingent Approval of an amendment application must include a point-by-point response to each concern using the PRMC Review Outcome, PI Response, and Response Review Form, regardless of whether the protocol is amended as part of the response. If the protocol is amended in response to the PRMC’s concerns, then the submission must also follow the criteria outlined in the appropriate Submission Requirements for PRMC section above.

If the Contingent Approval requests Site Committee input (for example, on feasibility of the protocol amendment), the study team must approach the responsible Site Committee and request that the Chair or Co-Chair complete the Site Committee Protocol Amendment Review Form (in rare instances a higher level of review may be requested).
The study team should include the Protocol Amendment Review Form with the response to Contingent Approval in OnCore.

Withdrawal Procedure

An amendment may be withdrawn by the PI or designee while it is still in the review process. If an amendment has been approved by PRMC, but not by any other regulatory body, the approval may be withdrawn. The request for withdrawal must be made in writing. If an amendment has been approved by any regulatory body other than PRMC it cannot be withdrawn. Should the PI wish to reverse any changes contained within an amendment that cannot be withdrawn, the PI must submit a new amendment application as in Submission Requirements above, reversing the applicable amended items.

Alternate Procedures

There are no alternate procedures to this policy.
Policy Approval

This policy document was approved by the following personnel on the following dates:

________________________________________
Eric Small, MD
Deputy Director and Chief Scientific Officer,
Helen Diller Family Comprehensive Cancer Center

12/7/2020

________________________________________
Jennifer Clarke, MD, MPH
Chair, Protocol Review and Monitoring Committee,
Helen Diller Family Comprehensive Cancer Center

11/23/2020

________________________________________
Kate Shumate, MPA, CCRP
Chief of Staff and Director, Administration & Planning
Helen Diller Family Comprehensive Cancer Center

12/8/2020
Policy Revision Summary of Changes

Policy Title: PRMS Amendment Submission Policy
Version Date: November 23, 2020
Version Number: Revision 7

Notes: Page number corresponds to page number in updated version (Revision 7). New text in modified paragraphs is shown as **bold italics** and deleted text is shown as strikethrough.

<table>
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<th>Page No.: All pages</th>
<th>Section: Footer</th>
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<tr>
<td>Original Text</td>
<td>Revision 6</td>
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<tr>
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<td>09/25/2019</td>
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<td>Revision 67</td>
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<td>Reason for Change</td>
<td>Updated text to reflect revised version number and date.</td>
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<th>Section: Policy Sub-Title</th>
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<td>PRMS Procedure for Submitting Protocol Amendments to the Protocol Review Committee</td>
</tr>
<tr>
<td>New Text</td>
<td>PRMS Procedure for Submitting Protocol Amendments to the Protocol Review <strong>and Monitoring</strong> Committee</td>
</tr>
<tr>
<td>Reason for Change</td>
<td>Added “and Monitoring” to the full name of the PRC, which is now PRMC.</td>
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<tr>
<td>Page No.: 1</td>
<td>Section: Purpose</td>
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<td><strong>Reason for Change</strong></td>
<td>Added the full name of the PRMC, and amended the acronym from PRC to PRMC.</td>
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<td><strong>Reason for Change</strong></td>
<td>Added “and Monitoring” to the full name of the committee, and changed the committee acronym from PRC to PRMC.</td>
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### Definitions

**Original Text**

Protocol amendments are any revisions made to a protocol after it has been submitted to or reviewed by *any* regulatory body, regardless of the nature of the change, which can be typographical, editorial, administrative, scientific, etc. At the UCSF Helen Diller Family Comprehensive Cancer Center, regulatory bodies include, but are not limited to, the Site Committees, PRC, the UCSF IRB, Radiation Safety Committee, Biosafety Committee, and the FDA.

**New Text**

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**Reason for Change**

Changed the committee acronym from PRC to PRMC, and added IRB of Record to the UCSF IRB.

### Procedures

**What Needs to be Submitted to PRC**

All protocol amendments created after initial Site Committee submission but prior to initial PRC approval must be submitted to the PRC as part of the Initial Review PRC submission, as per query instruction from the PRC Administrator. All amendments made after initial PRC approval must be submitted to the PRC as amendments (Change Reviews), as per this policy.

Protocols exempt from PRC review do not require amendment review by the PRC.

**What Needs to be Submitted to PRMC**

All protocol amendments created after initial Site Committee submission but prior to initial PRMC approval must be submitted to the PRMC as part of the Initial Review PRMC submission, as per query instruction from the PRMC Administrator. All amendments made after initial PRMC approval must be submitted to the PRMC as amendments (Change Reviews), as per this policy.

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**Reason for Change**

Changed the committee acronym from PRC to PRMC.
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### Reason for Change

Revised the link language, and added a link for the (new) Behavioral protocol template.

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### Original Text

- If the amendment is in response to a request for revision from a collaborator, the FDA, UCSF IRB, or any other regulatory body, a copy of that request for revision document should be included.

### New Text

- If the amendment is in response to a request for revision from a collaborator, the FDA, UCSF IRB or IRB of record, or any other regulatory body, a copy of that request for revision document should be included.

### Reason for Change

Added IRB of Record to the UCSF IRB.
<table>
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<th>Section: Procedures</th>
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<tr>
<td>How to Submit</td>
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<td>Added section information, and replaced the OnCore Wiki link with the link to the HDFCCC Wiki.</td>
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<td>This policy document was approved by the following personnel on the following dates:</td>
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| Eric Small, MD  
Deputy Director and Chief Scientific Officer,  
Helen Diller Family Comprehensive Cancer Center | Date |
| Jennifer Clarke, MD, MPH  
Chair, Protocol Review Committee,  
Helen Diller Family Comprehensive Cancer Center | Date |

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Helen Diller Family Comprehensive Cancer Center | Date |
| Kate Shumate, MPA, CCRP  
Chief of Staff and Director, Administration & Planning  
Helen Diller Family Comprehensive Cancer Center | Date |

| Reason for Change | Changed the committee acronym from PRC to PRMC in the Chair’s signatory section, and added Chief of Staff as new signatory. |