Institutional Review Board  COVID - 19 IRB Modification Form

Today’s Date: _______________________

Current IRB #: _______________________

Current IRB Title: ____________________________________________________________

Investigator Name: ___________________________________________________________

Investigator Contact Information: name, title, email, phone and address
___________________________________________________________________________
___________________________________________________________________________

Adviser Name and Contact Information (if applicable):
___________________________________________________________________________
___________________________________________________________________________

Current recruitment and study protocols involving human subjects:

Changes due to COVID 19 (please check all that apply)

___ If you intend to simply pause all study activities involving in-person contact until the IRB has lifted its restriction, check this box. Note that you can still code data, conduct analyses, test equipment, and do all other things that do not involve in-person contact with participants.

___ If you intend to replace in-person contact with virtual contact via, e.g., Zoom or Skype, then check this box. Describe all changes to your recruitment methods, informed consent procedure, and data security below. Note that video recordings are large files so, if you intend to make video recordings, you must have a plan for securely storing large files. If you plan to use virtual means and zoom in particular, please check the IRB webpages for recommendations regarding use and security.
___ If your study does not involve in-person contact, but your procedures for accessing sensitive information must change (e.g., moving files from campus to home), check this box. Describe all new procedures below, including how you will transport your data.

___ If none of the above apply, but the campus closure and IRB’s restrictions require you make other modifications to your protocol, check this box and describe below.

Describe any and all changes to your protocol, including recruitment strategy, process for obtaining informed consent (e.g., documentation via audio recording), informed consent text, study procedures, storage of data files while you are actively analyzing them, "cold storage" of data files, procedures for transmitting/transporting data, additional persons who will handle or have access to physical or electronic records, and dates for commencing, resuming, and completing your work. Please remember as with all existing protocols and modified protocols, to maintain accurate time and date records for all contact/communication with research participants.