Center for Cancer Research (CCR) Scientific Review (SR) Process

Step 1-Branch Concept Review

During the Branch Concept Review: All concepts (or Letter of Intent (LOIs)) will first be reviewed within each branch, and approved by the Branch Chief (BC) to proceed. During this review branches should consider:

- Feasibility of the study
- Fit of the study within the mission of the branch and CCR
- Study branch-level resources required (and any additional resources that are needed outside the branch).

The branch will coordinate and schedule these meetings. No minutes need to be taken at these meetings; however, the signature of the Branch Chief on the iRIS submission form indicates that the concept has been discussed and approved at the branch level.

Step 2-CCR Scientific Review

Prior to the CCR Scientific Review:

Submission:

The following documents are required for submission of each protocol:

- Protocol or Letter of Intent (LOI) if protocol is being submitted to CTEP. If the protocol is written by a third party (i.e. pharma or cooperative group) the NCI specific appendix should be included.
- CCR Resource Form
- The PI's CV
- Planned enrollment form
- Milestone Plan
- Memo from the PI which briefly outlines:
    - Why the study should be done at the NCI
    - How the study fits with the overall interests and programmatic goals of his/her group
    - In the case of multicenter studies, what the specific contribution of the NCI will be.

All protocols will be submitted via iRIS for CCR review at least 10 days prior to the scheduled meeting. Both the Principal Investigator (PI) and the BC will need to sign off on the submission in iRIS. The Protocol Support Office (PSO) must receive the full submission with Branch Chief signature of approval in order to schedule the study on the review docket (submissions after the deadline will be postponed to next review cycle if not received in time).

Invitees & Responsibilities:

- The Committee has a standing membership with ad hoc reviewers as required.
- The Committee will have rotating chairs. The Chair cannot preside over the Committee if he/she is the PI or an Associate Investigator (AI) on a protocol being presented.

- Two members will be assigned by the Committee Chair as reviewers. Both reviewers must not be the PI or an AI on the protocol. Reviewers may be selected from external organizations if required. All assigned reviewers are required to provide comments in writing to the PSO 1 day prior to the meeting, and should make every effort to attend the meeting. The reviewer comments will be compiled and sent to the Chairs the morning of the meeting.
- The protocol and resource form will also be distributed to CC Pharmacy, CC Department of Transfusion Medicine (DTM), Pathology, Office of Research Nursing, Data Management and monitoring, PSO, Pharmacokinetics, Clinomics, Technology Transfer, Radiation, CCR Office of Information Technology and Molecular Imaging to review for impact on their departments no later than 8 days prior to the review meeting. They should submit their comments in writing to the PSO 1 day prior to the meeting. These comments will be collated and reviewed by the Office of the Clinical Director (OCD) of the CCR.
- The protocols that are scheduled for each review will be sent via email to the CCR protocol listserv so that all investigators can be made aware of new protocols in the CCR. Any investigator is welcome to send comments about protocols being reviewed to the PSO who will include the comments for the Chair's consideration.

Scheduling:
The Committee will generally meet on the first and third Thursday of each month.

During the CCR Scientific Review:
PSO will administer the CCR Scientific Review meeting including scheduling, taking minutes and attendance, and coordinating efforts. The PI must be available for the review of the protocol; however, the PI may elect a designee to discuss the protocol.

Structure of the meeting:
- The assigned reviewers will present their comments to the members and discuss.
- Reviewers should comment on: research strategy, feasibility, clinical strategy and impact.
- The PI (or designee) will be available to answer questions from the Committee.
- The Committee will vote by secret ballot at the meeting. Decisions will be made by majority vote.
- If a Committee member is listed as the PI or has a significant Conflict of Interest on a study being reviewed, that person will not participate in the vote.
- The Chair will participate in the vote.
- Possible voting outcomes are:
    - Approved
    - Approved with recommendations
    - Returned with stipulations back to the chair
    - Deferred with stipulations back to the full Committee
    - Disapproved

- The ballot includes a score based on scientific merit between 1 (lowest) – 10 (highest). (Only for new protocols, not amendments)
- In case of a tie, the Chair's vote will be used to resolve it.
- The final vote outcome along with the average score will be calculated and sent to the committee the next day.

After the CCR Scientific Review:

- Meeting minutes, voting outcome, reviewer comments, and attendee comments sent to the Chair and Clinical Director for review and approval.
- Approved meeting minutes, voting outcome, comments, and the Chair's summary are entered into iRIS and sent to the respective PI and Branch Chief.
- The OCD designee will review resources and will sign off in iRIS prior to the outcome letter being distributed.

Expedited procedure for protocols:

Some protocols may bypass being reviewed at the CCR scientific review meeting and may be reviewed via email by the Committee. The Chair will initially determine if the study needs to be reviewed at the Committee meeting based on the criteria below. If the protocol is reviewed via email, the Committee members will indicate if they agree with the protocol moving forward as written or if they think the protocol needs to be reviewed at a Committee meeting. These protocols will still require resource review by the OCD.

Examples of protocols that may qualify include:

- Cooperative groups studies where CCR is a participating site
- U01 grant protocols where CCR is a participating site
- Protocols that are written to collect long-term follow–up data from patients enrolled on earlier trials
- Data and specimen analysis protocols
- Retrospective chart review protocols
- Epidemiologic or behavioral health studies

CTEP Dual Review

Letters of Intent (LOI)s should be reviewed at the CCR scientific review meeting prior to submission to CTEP as an LOI. Resource review by the OCD of these protocols will occur at this stage as well. Approved LOIs will be submitted to CTEP by the SRC Coordinator after the CCR review has been completed. Reviewers as designated at the scientific review will join the call for review with CTEP Protocol Review Committee, for both the CTEP LOI review and the CTEP protocol review.

Amendments

The CCR Scientific Review Committee will also review amendments that meet the following criteria:

1. A change in protocol primary objectives.
2. Adding any new study agent.

3. Change in trial design of significant consequence. For example, adding arms or removing arms to randomized phase II trial.
4. Adding more than 20% additional patients to the currently approved ceiling.

- Amendments requiring scientific review will be entered into iRIS and will include a tracked protocol/consent and cover memo.
- The Branch Chief signature will be required on all submissions, which indicates that this has been approved at the branch level.
- Protocols that go through CTEP review must be also submitted in iRIS for resource review if the amendment meets the above criteria.
- The protocol and resource form will also be distributed to CC Pharmacy, CC Department of Transfusion Medicine (DTM), Pathology, Office of Research Nursing, Data Management and monitoring, PSO, Pharmacokinetics, Clinomics, Technology Transfer, Radiation, CCR Office of Information Technology and Molecular Imaging to review for impact on their departments no later than 8 days prior to the review meeting. They should submit their comments in writing to the PSO 1 day prior to the meeting. These comments will be collated and reviewed by the OCD of the CCR.
- Reviewers will be assigned as determined by the Chair.
- If a PI wishes to expand his/her protocol to other sites, this does not need to go through SR but must be discussed with and approved by the Office of the Clinical Director (OCD) prior to submitting amendment to the IRB.