**Appendix L**

**Opinion of Principal Investigator**

**and Determination by UConn Health Oversight Bodies**

**Regarding Need for Review by the NIH Research Advisory Committee**

In March of 2016 changes to the human gene transfer protocol review process were made by NIH, in consultation with the Institute of Medicine, regarding the NIH Recombinant DNA Advisory Committee’s (RAC) review of individual human gene transfer trials. Per the change RAC review should be limited to cases in which an oversight body (such as an Institutional Biosafety Committee (IBC) or an Institutional Review Board(IRB)) determines that a protocol would significantly benefit from RAC review, and the protocol has been determined to meet one or more of the criteria for RAC review as defined in Section B.

**Note:** Investigators may not begin work until final approval has been granted by both the Institutional Biosafety Committee (IBC) and the Institutional Review Board (IRB). Final IBC approval cannot be granted until the PI receives confirmation that the NIH Registration process has been completed and that confirmation has been provided to the IBC.

**Instructions**: IBC review is to occur **prior to** IRB review. Investigator is to complete section A and B of this form and include it in the submission to the IBC. After review the IBC will return this form to the Investigator with the opinion of the IBC noted in section C. The investigator then includes this form with the determination of the IBC noted as part of the application to the IRB. If the IBC requested review by RAC, the investigator should proceed with obtaining IRB review. After review the IRB will return this form to the investigator with the opinion of the IRB noted. When submitting required documentation to NIH the Principal Investigator can use this completed form as the required written assessments from all oversight bodies involved in the review at the initial site as to whether RAC review is warranted.

**A. Study Information:**

**Name of Principal Investigator:**

**Title of Project:**

**B. Opinion of Principal Investigator**

Criteria for RAC Review:

1. The protocol uses a new vector, genetic material, or delivery methodology that represents a first-in-human experience, thus presenting an unknown risk; or
2. The protocol relies on preclinical safety data that were obtained using a new preclinical model system of unknown and unconfirmed value; or
3. The proposed vector, gene construct, or method of delivery is associated with possible toxicities that are not widely known and that may render it difficult for oversight bodies involved to evaluate the protocol rigorously.

[ ]  Review by RAC is recommended because criteria [ ]  1 [ ]  2 [ ]  3 as noted above is met.

[ ]  Review by RAC **is not** recommended because none of the criteria, as noted above, are met.

**If RAC review is not recommended please complete the following:**

1) Provide citations that demonstrate prior use of the vector, genetic material or delivery methodology.

***Response:***

2) Describe the established/accepted preclinical model system that was used to obtain the preclinical safety data. Provide citations if available.

 ***Response:***

3) Provide citations that demonstrate the established safety/toxicity data regarding vector, gene construct, or method of delivery.

***Response:***

**C. Determination Made by Institutional Biosafety Committee (IBC)**

[ ]  Review by RAC is requested because criteria [ ]  1 [ ]  2 [ ]  3 as noted above is met.

[ ]  Review by RAC is not requested because none of the criteria, as noted above, are met.

**Additional Comments, if any, from IBC, regarding request for RAC review**:

***Printed Name and Title of IBC Representative:***

***Signature of IBC Representative and Date***

**D. Determination Made by Institutional Review Board**

[ ]  Review by RAC is requested because criteria [ ]  1 [ ]  2 [ ]  3 as noted above is met.

[ ]  Review by RAC not requested because none of the criteria, as noted above, are met.

**Additional Comments, if any, from IRB**:

***Printed Name and Title of IRB Representative:***

***Signature of IRB Representative and Date:***