Walsh, Deborah

From: Robert Rosenfield, M.D. [redacted]
Sent: Monday, November 29, 2004 1:57 PM
To: tosafo@delphi.bsd.uchicago.edu
Cc: Walsh, Deborah
Subject: 13472A revision

13472A_AssentFor m_PTS_11-23-0_... | 13472A_AssentFor m_Vol_11-23-0_... | 13472A_CF_AdGnD _11-29-04.doc (... | 13472A_CF_PTS_1 1-29-04_.doc (8... | 13472A_CF_VOL_1 1-29-04_.doc (8...

Dear Dr. Moss,

Re the IRB Pending-Conditional review of Protocol 13472A, we have responded as suggested and are atttaching hard copies of the assent and consent forms. They have all been revised as suggested. Hard copies of the originals and versions with highlighted changes are being hand-delivered under separate cover.

Two items deserve comment.
1. Re #I. We look forward to the 407 review of this protocol. We urge you to submit these as soon as possible.

2. Re#II. The material (amendment #6) was submitted to the FDA belatedly by Fed Ex on Nov 15, 2004. The documents had inadvertently gotten buried in a pile on my RN's desk rather than being sent out when I had anticipated. We will inform you when the 30-day wait period has passed.

3. Re #III. The assent and consent forms have all been revised as suggested.

I trust that this will finalize the documentation needed for conditional approval (of patients) and 407 review (for control children).

Sincerely,

Bob Rosenfield

X-Sieve: CMU Sieve 2.2
X-Sender: [redacted] (Unverified)
Date: Mon, 20 Dec 2004 16:44:49 -0600
To: tosafo@delphi.bsd.uchicago.edu
From: "Robert Rosenfield, M.D." [redacted]
Subject: 13472A
Cc: "Deborah Walsh, MS, RN" [redacted]
"Nancy Devine, RN" [redacted],
"Elizabeth Baumann, MD" [redacted]
X-OriginalArrivalTime: 20 Dec 2004 22:48:42.0021 (UTC) FILETIME=[0DB77550:01C4E6E6]
X-Spam-Not-Checked: Messages over 100K not checked
X-Scanned-By: MIMEDefang 2.35

Tasha,

A loose end.

I have received the critique from the CRC with their provisional acceptance. They had minor suggestions that affected the wording of the protocol and the DSMP.

My response letter and accordingly revised protocol and DSMP are attached.

Also a revised Narrative is enclosed that reflects all the little changes since the last version was submitted.

All the changes are in blue on the electronic version.

The FDA 30-day waiting period has passed without a response from them (the amendment was sent by 2-day Federal Express on Nov 11, 2004). Therefore, we can proceed with the 407 submission using the documents that you now have in hand.

Bob Rosenfield

CRC_Adv_Comm#13472A.doc

13472A_research_plan_new_full_3

13472A_DSMP_APPLIC_12-04.doc

13472A_CF_PTS_11-29-04_1.doc

DETAILED_NARR_13472A1#77E6E.doc

To: "Devine, Nancy" [redacted]
From: Tasha Osafo <tosafo@bsd.uchicago.edu>
Subject: RE: Protocol 13472A
Cc:
Bcc:
Attached:

Hi Nancy and Debbie,

I take it from your response that it is okay with dr. rosenfield to go ahead and have a separate consent form for adult volunteers.

I have gone ahead and printed out a copy of the new adult volunteer consent form for our records. I have also taken the adult patient consent form and changed the footers so that it indicates its for patients. I will attach a copy of it for your records.

At this time, it appears that all outstanding issues are now taken care of. Thanks for your help.

Tasha

At 03:13 PM 1/6/2005, you wrote:

It's wonderful! Thanks! Nancy and Debbie

---------- **From:** Tasha Osafo **Sent:** Tuesday, January 4, 2005 11:44 AM **To:** Devine, Nancy **Subject:** RE: Protocol 13472A

<<File: 13472A_CF_PTS_12-30-04_.doc>><<File: 13472A_CF_AdGnD_12-30-04.doc>>
Nancy and Debbie,
1) I noticed that in the consent form for child patients, the total number of subjects to be enrolled is 280. However, on the other two consent forms, it is now changed to 300. I assume the child patient consent should also have been changed to 300. As I'm trying to get this protocol to a reviewer today I'm going to go ahead and revise the consent from to say 300. Attached is a copy of the revised consent for child patients. please let me know if this is problematic or if its ok.
2) Also, I have another suggestion which I hope will not be too problematic. I see that we have only 1 consent form for adults. However, I think it would be best to have a separate consent form for adult patients and adult volunteers. I have a feeling that once the federal government sees this protocol, they will immediately notice that there is not a separate consent form for each adult study population. I would like to take care of this now, before they say anything.
The current consent form for adults is appropriate for the adult patient population. I just suggest revising the title and footers to indicate that it will be used for adult patients. Please send me a copy of the revised adult patient consent form.
The consent form for adult volunteers should look almost exactly like the pt. consent except for changes in the benefits section, compensation section, and confidentiality section. You would also want to revise the title and footers to indicate that it is for adult volunteers. To assist you, I have attached a copy of the adult consent form with changes

highlighted in blue that I think are appropriate to make this consent form ready for adult volunteers. Please send me a copy of the adult volunteer consent form.
Of course, if Dr. Rosenfield does not want to do a separate consent form for each adult population, he has the right to refuse to implement my suggestions. We can then present it to the Committee and let them decide.
If possible, please respond by within the next couple of days. I will be sending the protocol to a reviewer for the meeting on the 11th of January.
thanks, tasha
At 04:31 PM 12/30/2004, you wrote:

Hi, Tasha. Corrections to the consent forms as you requested in #1, #2, and #3 have been done and are attached. I made hard copies but it is too late to bring to IRB today. I left a note asking Debbie to deliver them to you if you need them. Dr. Rosenfield responded to #4. Thanks. <<13472A_CF_PTS_12-30-04_.doc>> <<13472A_CF_AdGnD_12-30-04.doc>> <<13472A_CF_VOL_12-30-04_.doc>>

---------- **From:** Tasha Osafo **Sent:** Tuesday, December 28, 2004 5:01 PM
To: Rosenfield, Robert **Cc:** Devine, Nancy; Walsh, Deborah **Subject:** Protocol 13472A

Dear Dr. Rosenfield, In regards to 13472A, I was informed by Millie that due to the additional changes that were made to the protocol per the CRC, it will have to be reviewed at the next IRB meeting on January 11th. I have reviewed the revised documents that you e-mailed to me on 12/20/04. After reviewing your response, I have the following comments:

1. **DNA Sample Language:** You submitted a revised consent form for "Patients" in which you made a couple of changes on page 2, in the "DNA Sample" section. After reviewing the changes and reading the new information that was provided in the "Research Plan" about molecular genetic studies (page 4), I felt that the consent form could still be clearer about the collection of blood for DNA extraction and the creation of cell lines (including issues that we asked Dr. Baumann to address regarding ownership of the cell line). Below is an example of the type of language that I suggest using. Please note that this is my suggested language. You can choose to retain the language that is already in the consent and allow the Committee to decide if it is acceptable.

"DNA sample: With your permission, two additional tablespoons of blood will be drawn for future studies of the genetic cause of delayed puberty. In order to conduct such studies, we will extract DNA from the blood and store it in deep freeze in the CRC Core Laboratory. It is possible that a sample of your child's DNA might be sent to another researcher for further testing for this purpose. To protect your child's identity, his or her DNA samples will be identified only by a code. We will also use some of the blood to create a cell line. A cell line is a way of preserving the cells in your blood so that they can be reproduced and kept around for as long as we need them. If we should run out of the DNA extracted from your blood, we will use the cell line as a back-up source and create more DNA from it. That way, we do not need to draw more blood from your child if more DNA is required and if new technology for future genetic analysis eventually becomes available. We intend to use the cell lines strictly for studies regarding the genetic cause of delayed puberty. The cell line will be owned by the University of Chicago. Any information or products that are derived

from these cell lines will be the property of the University of Chicago. Please initial one of the following options regarding our taking a blood sample to obtain DNA for this purpose.

_____ *I do not wish my child to give blood for DNA and cell line creation* _____ *I give my permission to take my child's blood for DNA and cell line creation"*

2. **"Volunteer" and "Adult" consent form:** I noted that you only submitted the "Patient" consent form with the changes requested by the CRC. Is there a specific reason why the "Volunteer" and "Adult" consent forms were not revised and submitted as well? If not, please revise them to include the changes requested by the CRC, and if you agree, my suggested language above regarding DNA samples.
3. **"Adult" consent form:** "In the "Adult Gonadotropin Deficinecy" consent form, I noticed that the signature section needs revised as it asks for the signature of parents, however, only adult subjects are being asked to sign this consent form. Sorry this wasn't caught earlier. Please remove the section entitled "Parent/Guardian/or legally authorized representative" and replace with:

SUBJECT The research project and the procedures associated with it have been explained to me. The experimental procedures have been identified and no guarantee has been given about the possible results. I will receive a signed copy of this consent form for my records.

I agree to participate in this study. I am aware that my participation is voluntary and that I do not have to sign this form if I do not want to be part of this research study.

Signature of Subject:_____

Date:_____ Time:_____ AM/PM (Circle)

4. **Carol Foster at U of M:** I noted that in the letter to the CRC Advisory Committee, response #1 states "Expanding sample size. Carol Foster at the U of M is embarking on a similar study." As I do not have the pending letter issued by the CRC, the context of this response is unclear to me. Please note that if you are sharing samples with Carol Foster, or she is sharing samples with you, this will need to be addressed by the IRB. Please clarify the situation with U of M.

If possible, please respond by Monday, January 3rd. We will be sending this protocol to a reviewer on Tuesday, January 4th. Thanks and let me know if you need any assistance regarding this matter.

Tasha Tasha Osafo Quality Assurance/Education Administrator Institutional Review Board Biological Sciences Division The University of Chicago Ph (773) 834-8994 Fax (773) 834-0659

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Tasha Osafo

Quality Assurance/Education Administrator

Institutional Review Board

Biological Sciences Division

The University of Chicago

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X-Sieve: CMU Sieve 2.2
Subject: RE: FW: Protocol 13472A
Date: Wed, 5 Jan 2005 11:58:10 -0600
X-MS-Has-Attach:
X-MS-TNEF-Correlator:
Thread-Topic: FW: Protocol 13472A
Thread-Index: AcTyb9J35tTH2WrxQymNgSMZLoe+tQA3/9cQ
From: "Walsh, Deborah" <[redacted]>
To: "Tasha Osafo" <tosafo@bsd.uchicago.edu>
X-Spam-Short-Score: 0.575
X-Spam-Likelihood: very low
X-Scanned-By: MIMEDefang 2.35

Tasha,

Dr. Rosenfield has just started his sabbatical and won't be back in touch until the end of this week when his e-mail is hooked up at his home. He will be in town and meeting with us on Jan 21. I hope to have some answers for you by early next week though after his e-mail is up and running.

Debbie

-----Original Message-----
From: Tasha Osafo [mailto:tosafo@bsd.uchicago.edu]
Sent: Tuesday, January 04, 2005 9:19 AM
To: Walsh, Deborah
Cc: Devine, Nancy
Subject: Re: FW: Protocol 13472A

Debbie,

I attempted to e-mail Dr. Rosenfield however, I kept getting my messages bounced back.

Can you please inform Dr. Rosenfield that if he and Dr. Foster at U of M are pooling data, then we need notice of IRB approval from Dr. Foster's IRB. I'm unsure from the term "pooling data" if Dr. Rosenfield is sending data to Dr. Foster, or vice versa. If he is sending Dr. Foster data, the consent form needs to explicitly state what is being disclosed to her. Otherwise, HIPAA regulationsmay be in violation.

To summarize: Please update me on the status of Dr. Foster's study at U of M (has it gone for IRB review yet or not?) and provide IRB approval letter from U of M if its available; please clarify which PI is the lead PI for this collaboration (Dr. Rosenfield or Dr. Foster?); please clarify exactly what information is being shared, or will be shared with Dr. Foster, including any type of data, names, dates, gender, etc. I need this information in order to assess if the consent form needs revised.

Thanks and feel free to contact me with any questions regarding this matter.
Tasha Osafo
At 04:07 PM 1/3/2005, you wrote:

Tasha,

Here's Dr. Rosenfield's reponse (at the bottom of the e-mail below.

Debbie

-----Original Message-----
From: Robert Rosenfield, M.D. [redacted]
Sent: Tuesday, December 28, 2004 5:27 PM
To: Walsh, Deborah
Cc: Devine, Nancy
Subject: Fwd: Protocol 13472A

Ladies, Please revise consents accordingly (or talk to me if you are unclear). I have answered the last question. bob

X-Sender: tosafo@imap.bsd.uchicago.edu
Date: Tue, 28 Dec 2004 17:01:48 -0600
To: "Robert Rosenfield, M.D." [redacted]
From: Tasha Osafo <tosafo@bsd.uchicago.edu>
Subject: Protocol 13472A
Cc: [redacted]
X-Spam-Short-Score: 0.575
X-Spam-Likelihood: very low
X-Scanned-By: MIMEDefang 2.35
X-OriginalArrivalTime: 28 Dec 2004 22:55:41.0703 (UTC) FILETIME=
[5B2BD970:01C4ED30]
Dear Dr. Rosenfield,

In regards to 13472A, I was informed by Millie that due to the additional changes that were made to the protocol per the CRC, it will have to be reviewed at the next IRB meeting on January 11th. I have reviewed the revised documents that you e-mailed to me on 12/20/04. After reviewing your response, I have the following comments:

1. DNA Sample Language: You submitted a revised consent form for "Patients" in which you made a couple of changes on page 2, in the "DNA Sample" section. After reviewing the changes and reading the new information that was provided in the "Research Plan" about molecular genetic studies (page 4), I felt that the consent form could still be clearer about the collection of blood for DNA extraction and the creation of cell lines (including issues that we asked Dr. Baumann to address regarding ownership of the cell line). Below is an example of the type of language that I suggest using. Please note that this is my suggested language. You can choose to retain the language that is already in the consent and allow the Committee to decide if it is acceptable.

"**DNA sample:** With your permission, two additional tablespoons of blood will be drawn for future studies of the genetic cause of delayed puberty. In order to conduct such studies, we will extract DNA from the blood and store it in deep freeze in the CRC Core Laboratory. It is possible that a sample of your child's DNA might be sent to another researcher for further testing for this purpose. To protect your child's identity, his or her DNA samples will be identified only by a code. We will also use some of the blood to create a cell line. A cell line is a way of preserving the cells in your blood so that they can be reproduced and kept around for as long as we need them. If we should run out of the DNA extracted from your blood, we will use the cell line as a back-up source and create more DNA from it. That way, we do not need to draw more blood from your child if more DNA is required and if new technology for future genetic analysis

eventually becomes available. We intend to use the cell lines strictly for studies regarding the genetic cause of delayed puberty. The cell line will be owned by the University of Chicago. Any information or products that are derived from these cell lines will be the property of the University of Chicago. Please initial one of the following options regarding our taking a blood sample to obtain DNA for this purpose.

_____ *I do not wish my child to give blood for DNA and cell line creation*
_____ *I give my permission to take my child's blood for DNA and cell line creation"*

2. "Volunteer" and "Adult" consent form: I noted that you only submitted the "Patient" consent form with the changes requested by the CRC. Is there a specific reason why the "Volunteer" and "Adult" consent forms were not revised and submitted as well? If not, please revise them to include the changes requested by the CRC, and if you agree, my suggested language above regarding DNA samples.

3. "Adult" consent form: "In the "Adult Gonadotropin Deficinecy" consent form, I noticed that the signature section needs revised as it asks for the signature of parents, however, only adult subjects are being asked to sign this consent form. Sorry this wasn't caught earlier. Please remove the section entitled "Parent/Guardian/or legally authorized representative" and replace with:

SUBJECT
The research project and the procedures associated with it have been explained to me. The experimental procedures have been identified and no guarantee has been given about the possible results. I will receive a signed copy of this consent form for my records.

I agree to participate in this study. I am aware that my participation is voluntary and that I do not have to sign this form if I do not want to be part of this research study.

Signature of Subject: _____
Date: _____ Time: _____ AM/PM (Circle)

4. Carol Foster at U of M: I noted that in the letter to the CRC Advisory Committee, response #1 states "Expanding sample size. Carol Foster at the U of M is embarking on a similar study." As I do not have the pending letter issued by the CRC, the context of this response is unclear to me. Please note that if you are sharing samples with Carol Foster, or she is sharing samples with you, this will need to be addressed by the IRB. Please clarify the situation with U of M.

The CRC said the sample size is small and suggested a collaboration to increase it. My response that Dr Foster is embarking on a similar study does not necessarily involve sharing samples. We will both be running the same protocol independently and pool data for analysis.

If possible, please respond by Monday, January 3rd. We will be sending this protocol to a reviewer on Tuesday, January 4th. Thanks and let me know if you need any assistance regarding this matter.

Tasha
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To: "Zenko, Carol"[redacted]
From: Tasha Osafo <tosafo@bsd.uchicago.edu>
Subject: RE: Protocol 13472A:Dr. Rosenfield
Cc:
Bcc:
Attached:

Hi Carol,

Thank you for the information. Just to clarify, if Dr. Foster receives funding, she will then have to obtain IRB approval from her site. Once that is established, Dr. Rosenfield will have to submit an amendment to his protocol 13472A to include Dr. Foster as a collaborator, a copy of his workscope, notice of IRB approval from Dr. Foster's site, and a revised consent form describing what information will be shared with Dr. Foster.

Thanks again,
Tasha

At 01:52 PM 1/6/2005, you wrote:
Tasha,

I do not have any information on the GCRC grant, however, I do know that Dr. Foster recently submitted a grant application to the NIH which listed the University of Chicago as a subcontract site with Dr. Rosenfield serving as the PI. That grant has not received NIH approval yet. Dr. Foster should receive notification regarding the funding status of the grant sometime in May or June. Deborah Walsh, Dr. Rosenfield's nurse, might have additional information for you. Her number is 5-1887.

Carol Zenko

-----Original Message-----
From: Tasha Osafo [mailto:tosafo@bsd.uchicago.edu]
Sent: Thursday, January 06, 2005 1:11 PM
To: Zenko, Carol
Subject: Protocol 13472A:Dr. Rosenfield

Hi Carol,

In regards to Dr. Rosenfield's study, #13472A, "Gonadotropin Releasing Hormone (GnRH) Agonist Test in Disorders of Puberty", our records indicate
that the General Clinical Research Center holds a grant that is supporting
this study. It is USPHS rr-00055.

Dr. Rosenfield informed the CRC that Carol Foster from University of

Michigan will be pooling data with him for analysis in order to increase

his sample size. If Dr. Foster is listed on the GCRC grant as a collaborator for Dr. Rosenfield's study, we will need to have IRB approval
from Dr. Foster's IRB before Dr. Rosenfield can pool data with her.

Can you update me with any information regarding Dr. Foster's involvement
in this study?

Thanks so much!

Tasha

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