U.S. Department of Health and Human Services (HHS) Registration of an Institutional Review Board (IRB)

This form is used by institutions or organizations operating IRBs that review:

- a) Research involving human subjects conducted or supported by the Department of Health and Human Services, or other federal departments or agencies that apply the Federal Policy for the Protection of Human Subjects to such research; and/or
- b) Clinical investigations regulated by the Food and Drug Administration (FDA) of the Department of Health and Human Services

This form is to be used for the following purposes:

- a. To register an IRB if your institution or organization has not previously registered an IRB
- b. To update or renew the registration of an IRB previously registered by your institution or organization
- c. To add another IRB to those previously registered by your institution or organization

Fields with an * are required for OHRP IRBs and FDA IRBs
Fields with an * are required for OHRP IRBs but are optional for FDA IRBs
Fields with an ‡ are required for FDA IRBs but are optional for OHRP IRBs
Fields with no symbol are optional for both OHRP IRBs and FDA IRBs

1. *Has your institution or organization previously registered an IRB with the Office for Human Research Protections (OHRP)?

[X] Yes, proceed to section 2 [] No, proceed to section 3

2. *What is your institution or organization (IORG) number? IORG0000196

This number was provided by OHRP the first time your institution or organization registered an IRB. If you do not know your IORG number, search for your institution or organization on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777.

3. Name of Institution or Organization Operating the IRB(s)

*Name of Institution or Organization: U of Pittsburgh

*Mailing Address: **3500 Fifth Avenue Hieber Building**

*Street Address (if different from the Mailing Address above):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

*Country (if outside the U.S.):

4. Senior Officer or Head Official of Institution or Organization Responsible for Overseeing the Activities Performed by the IRB(s)

*First Name: Randy Middle Initial: P *Last Name: Juhl

Earned Degree(s): PhD Title or Position: Vice Chancellor for Research Conduct & Compliance

*Mailing Address (if different from the Mailing Address in section 3):

132 Cathedral of Learning

*City: **Pittsburgh** *State/Province: **PENNSYLVANI** *Zip/Postal Code: **15261**

*Country (if outside the U.S.):

5. Contact Person Providing this Registration Information

*First Name: Melissa Middle Initial: *Last Name: Miklos

Earned Degree(s): **BS, CIP** Title or Position: **Program Manager**

Name of Institution or Organization (if different from the Name in section 3):

University of Pittsburgh IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue 105 Hieber Building

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

*Country (if outside the U.S.):

6. IRB Registration Information (to be completed separately for each IRB being renewed/updated or newly registered)

[X] Yes. Provide the IRB registration number previously assigned to this IRB by OHRP: IRB00000319

(This number was provided by OHRP the first time the IRB was registered with OHRP. If you do not know the IRB registration number, search for the IRB on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777)

[] No, this is a new IRB registration.

B. Provide the IRB name, if any, used by the institution or organization (e.g., State University Behavioral IRB, University Healthcare Biomedical IRB, or XYZ Hospital IRB #1):

U of Pittsburgh IRB #1 - A

C. Location of the IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue Hieber Building

*Street Address of the IRB (if different from the Mailing Address of the IRB):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

*Country (if outside the U.S.):

- D. Approximate number of full time equivalent positions devoted to the IRB's administrative activities:
- E. Approximate number of all active protocols (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
- F. Approximate number of active protocols conducted or supported by HHS (e.g., the National Institutes of Health, Centers for Disease Control and Prevention, etc.) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):

- G. ‡For IRBs that review, or intend to review, protocols involving products regulated by the Food and Drug Administration (FDA) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
 - ‡i) Approximate number of active protocols involving FDA-regulated products:
 - ‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

X human drugs food additivesX medical devices color additives

X medical devices color additiveX biological other

Specify:

H. IRB Chairperson

*First Name: Ronald Middle Initial: *Last Name: Shapiro

Earned Degree(s): M.D. Title or Position: IRB Chairperson

Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue, Ground Level

City: Pittsburgh State/Province: PENNSYLVANIA Zip/Postal Code: 15213

Country (if outside the U.S.):

*Phone: 412 383-1480 FAX: 412 383-1508 *E-Mail: shapiror@upmc.edu

I. ◆IRB Roster Form: Completion of the IRB Roster Form is required if your IRB is designated on a Federalwide assurance submitted to OHRP. Otherwise, it is optional.

| Member Name (Last, First) | Sex M/F | Earned Degree(s) | Scientist (S) Non-scientist (N) | Primary Scientific or Non-Scientific Specialty | Affiliation with Institution(s) Y/N | Comments |
|------------------------------|------------|---------------------|---------------------------------------|--|-------------------------------------|---------------------------|
| Shapiro, Ronald | M | MD | S | Transplant Surgery | Y | |
| Mitchell-O'Brien, Leeann | F | JD | N | Health and Hospital Law | N | |
| Howland, Robert | M | MD | S | Psychiatry | Y | |
| Klain, Miroslav | M | MD, PhD | S | Anesthesia | Y | |
| Dilts, Robert | M | PhD | N | Mathematics | Y | |
| Soran, Ozlem | F | MD | S | Cardiology | Y | |
| Irrgang, James | M | PhD, PT, ATC | S | Orthopedics, PT, Rehabilitation | Y | |
| Fink, Barbara | F | BS, MS | S | Ophthalmology Research | Y | |
| Schwartz, Miriam | F | none | N | support groups | N | |
| Dudjak, Linda | F | RN, PhD | S | nursing, oncology | Y | |
| Veraldi, Kristen | F | MD, PhD, FCCP | S | Pulmonary, Allergy, & CCM | Y | |
| Greenaway, Patty | F | RN, BSN | S | oncology nursing | Y | |
| Summersgill, Kurt | M | DDS, PhD | S | dental medicine, pathology | Y | |
| Raman, Venkataramanan | M | PhD | S | pharmacy | Y | |
| Schuchert, Matt | M | MD | S | thoracic surgery | Y | |
| Gildengers, Ariel | M | MD | S | psychiatry | Y | |
| Yip, Lin | F | MD | S | surgical oncology, endocrine surgery | Y | |
| Cho, Raymond | M | MD, MSc | S | psychiatry, neuroimaging | Y | |
| Comerci, John | M | MD | S | oncology, gynecology | Y | |
| | | | Alternativ | ve Members | | |
| Hurst, Kathleen | F | N/A | N | administrative | Y | any non-scientific membe |
| Orndoff, Patricia | F | RN, MEd | S | Nursing | Y | any other scientific memb |
| Valenti, Shannon | F | BS, MBA | N | Research regulations | Y | any non-scientific membe |
| Ivanusic, Carolyn | F | BS, MSW | N | IRB regulations | Y | any non-scientific membe |
| LeMenager, Michelle | F | BS | N | IRB regulations | Y | any non-scientific membe |
| Carey, Thomas | M | MSW, CIP | N | Social Work, IRB regulations | Y | any other scientific memb |
| Navratil, Judith | F | BA | N | IRB regulations | Y | any non-scientific membe |
| Klatt, Brian | M | MD | S | orthopedic surgery | Y | Any physician member |

| Miklos, Melissa | F | BS, CIP | N | IRB regulations | Y | any non-scientific membe |
|---------------------|---|-------------------|---|---|---|--|
| Brufsky, Adam | M | MD, PhD | S | Hematology/Oncology | Y | any physician member |
| McKaveney, Theresa | F | BS | N | IRB regulations | Y | any non-scientific membe |
| Moss, Deborah | F | MD | S | pediatrics | Y | any physician member |
| Patsy, Simon | F | RN, BS | S | pulmonary transplant, oncology | Y | any other scientific memb |
| Wenzel, Sally | F | MD | S | Pulmonary, Allergy & Critical Care Medic | Y | any physician member |
| Pinsky, Michael | M | MD | S | pulmonary & critical care medicine | Y | any physician member |
| Nebes, Robert | M | PhD | S | geriatric psychiatry | Y | any other scientific memb |
| Grabowski, Erin | F | BS, CIP | N | IRB regulations, psychology | Y | any non-scientific membe |
| Guido, Richard | M | MD | S | OB/GYN | Y | University of Pittsburgh I Executive Chairman |
| Tan, Henkie | M | MD, PhD | S | Transplant Surgery | Y | any physician member |
| Okonkwo, David | M | MD, PhD | S | neurosurgery | Y | any physician member |
| Pischke, Jack | M | MSW | N | incarceration | Y | prisoner representative |
| Wei, Lawrence | M | MD | S | cardiothoracic surgery | Y | any physician member |
| Tarhini, Ahmad | M | MD, MS | S | Hematology/Oncology | Y | any physician member |
| Hollabaugh, Kim | F | MSN, RN | S | nursing | Y | any other scientific memb |
| Lee, Ann | F | MSN, CRNP, CIP | S | cardiology, heart/lung transplant | Y | any other scientific memb |
| Holloway, Melanie | F | RN, BSN | S | pediatric nursing | Y | any other scientific memb |
| Manders, Ernest | M | MD | S | plastic & reconstructive surgery | Y | any physician member |
| DeSantes, Lisa | F | BS, CIP | N | IRB regulations, study coordination | Y | any non-scientific membe |
| Landolina, Nicholas | M | MPM, M.Ed. | N | management, non-scientific | Y | any non-scientific membe |

NOTES:

Members whose training, background, and occupation would incline them to view scientific activities from the standpoint of someone within a behavioral or biomedical research discipline should be considered a scientist, while members whose training, background, and occupation would incline them to view research activities from a standpoint outside of any biomedical or behavioral scientific discipline should be considered a nonscientist. In addition, the IRB must have members with sufficient knowledge of the specific scientific discipline(s) relevant to the research that it reviews.

Affiliation: Please indicate whether or not each individual (or a member of that person's immediate family) is affiliated (other than as an IRB member) with the institution or organization operating the IRB.

Yes = The IRB member is affiliated with the institution or organization operating the IRB.

No = The individual is not affiliated with the institution or organization operating the IRB.

Alternate Members: An alternate member(s) may be designated, as needed, for a regular voting member(s). An alternate member may vote only when the regular voting member is not voting.

[X] Yes. Provide the IRB registration number previously assigned to this IRB by OHRP: IRB00000320

(This number was provided by OHRP the first time the IRB was registered with OHRP. If you do not know the IRB registration number, search for the IRB on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777)

[] No, this is a new IRB registration.

B. Provide the IRB name, if any, used by the institution or organization (e.g., State University Behavioral IRB, University Healthcare Biomedical IRB, or XYZ Hospital IRB #1):

U of Pittsburgh IRB #2 - B

C. Location of the IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue Hieber Building

*Street Address of the IRB (if different from the Mailing Address of the IRB):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

*Country (if outside the U.S.):

- D. Approximate number of full time equivalent positions devoted to the IRB's administrative activities:
- E. Approximate number of all active protocols (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
- F. Approximate number of active protocols conducted or supported by HHS (e.g., the National Institutes of Health, Centers for Disease Control and Prevention, etc.) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):

- G. ‡For IRBs that review, or intend to review, protocols involving products regulated by the Food and Drug Administration (FDA) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
 - ‡i) Approximate number of active protocols involving FDA-regulated products:
 - ‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

X human drugs food additives

X medical devices color additives

X biological other Specify:

H. IRB Chairperson

*First Name: Margaret Middle Initial: *Last Name: Hsieh

Earned Degree(s): MD Title or Position: IRB Chairperson

Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue, Ground Level

City: Pittsburgh State/Province: PENNSYLVANIA Zip/Postal Code: 15213

Country (if outside the U.S.):

*Phone: 412 383-1480 FAX: 412 383-1508 *E-Mail: hsiehm@upmc.edu

I. ◆IRB Roster Form: Completion of the IRB Roster Form is required if your IRB is designated on a Federalwide assurance submitted to OHRP. Otherwise, it is optional.

| Member Name (Last, First) | Sex M/F | Earned Degree(s) | Scientist (S) Non-scientist (N) | Primary Scientific or Non-Scientific Specialty | Affiliation with Institution(s) Y/N | Comments |
|------------------------------|------------|-----------------------|---------------------------------------|--|-------------------------------------|---------------------------|
| Hsieh, Margaret | F | MD | S | Emergency Medicine | Y | |
| Palmer, Catherine | F | PhD | S | Audiology | Y | |
| Schraut, Wolfgang | M | MD | S | Surgery | Y | |
| Straka, Kristin | F | MSN, RN, CPN | S | Nursing Research and Evidence Based Prac | Y | |
| Yanowitz, Toby | F | MD | S | neonatology, pediatrics | Y | |
| Engh, Johnathan | M | MD | S | Neurological surgery | Y | |
| Olawaiye, Alexander | M | MD | S | OB/GYN, oncology | Y | |
| Chang, Judy | F | MD, MPH | S | OB/Gyn | Y | |
| McCormick, Nancy | F | BS, MS | N | research coordination, FDA regulations | Y | |
| Melanie, Holloway | F | RN, BSN, CIP | S | pediatric nursing | Y | |
| Becker, Stacey | F | BS | S | cognitive psychology; Autism-Neurobiolog | Y | |
| Hilmi, Ibtesam | F | MB, CHB, FRCA | S | anesthesia | Y | |
| Hathaway, Bridget | F | MD | S | otolaryngology | Y | |
| VanSwearingen, Jessie | F | PhD | S | physical therapy | Y | |
| Brown, Spencer | M | PhD | S | wound healing | Y | |
| Chamberlin, Jennifer | F | BS | N | research coordination | Y | |
| Rotondi, Armando | M | PhD | S | psychology, heath services systems | Y | |
| Prasad, Konasale | M | MD | S | psychiatry, genetics | Y | |
| Hrynkiw, Nancy | F | BS | N | non-scientific community member | N | |
| | | | Alternativ | ve Members | | |
| Lee, Ann | F | MSN, RN, CRNP, CIP | S | cardiology, heart/lung tx | Y | any other scientific memb |
| Flook, Donna | F | MSN, RN, CPN | S | pediatric nursing | Y | any other scientific memb |
| DeSantes, Lisa | F | BS, CIP | N | IRB regulations, study coordination | Y | any non-scientific membe |
| Jonkman, Lauren | F | PharmD, MPH, BCPS | S | Pharmacy and therapeutics | Y | any other scientific memb |

| Hollabaugh, Kim | F | MSN, RN | S | nursing | Y | any other scientific memb |
|-------------------|---|---------------|---|-------------------------|---|---------------------------|
| Greenaway, Patty | F | RN, BSN | S | oncology nursing | Y | any other scientific memb |
| Mathias, Ann | F | JD, MHSA | N | Corporate Compliance | Y | any non scientific membe |
| Gingrich, Jeffrey | M | MD | S | Urology | Y | any physician member |
| Libman, Ingrid | F | MD, PhD | S | pediatric endocrinology | Y | any physician member |
| Davis, Jan | F | RN. PhD. CRNP | S | cardiopulmonary nursing | Y | |

NOTES:

Members whose training, background, and occupation would incline them to view scientific activities from the standpoint of someone within a behavioral or biomedical research discipline should be considered a scientist, while members whose training, background, and occupation would incline them to view research activities from a standpoint outside of any biomedical or behavioral scientific discipline should be considered a nonscientist. In addition, the IRB must have members with sufficient knowledge of the specific scientific discipline(s) relevant to the research that it reviews.

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Yes = The IRB member is affiliated with the institution or organization operating the IRB.

No = The individual is not affiliated with the institution or organization operating the IRB.

Alternate Members: An alternate member(s) may be designated, as needed, for a regular voting member(s). An alternate member may vote only when the regular voting member is not voting.

[X] Yes. Provide the IRB registration number previously assigned to this IRB by OHRP: IRB00000321

(This number was provided by OHRP the first time the IRB was registered with OHRP. If you do not know the IRB registration number, search for the IRB on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777)

[] No, this is a new IRB registration.

B. Provide the IRB name, if any, used by the institution or organization (e.g., State University Behavioral IRB, University Healthcare Biomedical IRB, or XYZ Hospital IRB #1):

U of Pittsburgh IRB #3 - C

C. Location of the IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue Hieber Building

*Street Address of the IRB (if different from the Mailing Address of the IRB):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

*Country (if outside the U.S.):

- D. Approximate number of full time equivalent positions devoted to the IRB's administrative activities:
- E. Approximate number of all active protocols (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
- F. Approximate number of active protocols conducted or supported by HHS (e.g., the National Institutes of Health, Centers for Disease Control and Prevention, etc.) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):

- G. ‡For IRBs that review, or intend to review, protocols involving products regulated by the Food and Drug Administration (FDA) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
 - ‡i) Approximate number of active protocols involving FDA-regulated products:
 - ‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

X human drugs food additivesX medical devices color additives

X biological other Specify:

H. IRB Chairperson

*First Name: **Richard** Middle Initial: *Last Name: **Guido**

Earned Degree(s): MD Title or Position: IRB Chair

Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue

City: Pittsburgh State/Province: PENNSYLVANIA Zip/Postal Code: 15213

Country (if outside the U.S.):

*Phone: 412 383-1480 FAX: 412 383-1508 *E-Mail: rguido@mail.magee.edu

I. IRB Roster Form: Completion of the IRB Roster Form is required if your IRB is designated on a Federalwide assurance submitted to OHRP. Otherwise, it is optional.

| Member Name (Last, First) | Sex M/F | Earned Degree(s) | Scientist (S) Non-scientist (N) | Primary Scientific or Non-Scientific Specialty | Affiliation with Institution(s) Y/N | Comments |
|------------------------------|------------|---------------------|---------------------------------------|--|-------------------------------------|----------|
| Guido, Richard | M | PhD | S | neuropsychology | Y | |
| Grabowski, Erin | F | BS, CIP | N | IRB regulations, psychology | Y | |
| Ivanusic, Carolyn | F | BS, MSW | N | IRB regulations | Y | |
| Zelazny, Jamie | F | RN, MPH | S | psychiatric nursing | Y | |
| Oliver, D. Lamar | M | BS | N | electrical engineering, non-scientist | N | |
| Hsieh, Margaret | F | MD | S | Emergency Medicine | Y | |
| Miklos, Melissa | F | BS, CIP | N | IRB regulations | Y | |
| Ryan, Christopher | M | PhD | S | psychology, IRB regulations | Y | |
| Greenaway, Patty | F | RN, BSN | S | oncology nursing | Y | |
| Holloway, Melanie | F | RN, BSN, CIP | S | pediatric nursing | Y | |
| Hollabaugh, Kim | F | MSN, RN, CIP | S | nursing | Y | |
| Lee, Ann | F | MSN, CRNP, CIP | S | cardiology, heart/lung transplant | Y | |
| Barone, Jean | F | CIP | N | IRB regulations | Y | |
| | | | Alternativ | ve Members | | |
| DeSantes, Lisa | F | BS, CIP | N | IRB regulations | Y | |

NOTES:

Members whose training, background, and occupation would incline them to view scientific activities from the standpoint of someone within a behavioral or biomedical research discipline should be considered a scientist, while members whose training, background, and occupation would incline them to view research activities from a standpoint outside of any biomedical or behavioral scientific discipline should be considered a nonscientist. In addition, the IRB must have members with sufficient knowledge of the specific scientific discipline(s) relevant to the research that it reviews.

Affiliation: Please indicate whether or not each individual (or a member of that person's immediate family) is affiliated (other than as an IRB member) with the institution or organization operating the IRB.

Yes = The IRB member is affiliated with the institution or organization operating the IRB.

No = The individual is not affiliated with the institution or organization operating the IRB.

Alternate Members: An alternate member(s) may be designated, as needed, for a regular voting member(s). An alternate member may vote only when the regular voting member is not voting.

[X] Yes. Provide the IRB registration number previously assigned to this IRB by OHRP: IRB00003491

(This number was provided by OHRP the first time the IRB was registered with OHRP. If you do not know the IRB registration number, search for the IRB on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777)

- [] No, this is a new IRB registration.
- B. Provide the IRB name, if any, used by the institution or organization (e.g., State University Behavioral IRB, University Healthcare Biomedical IRB, or XYZ Hospital IRB #1):

U of Pittsburgh IRB #6 - F

C. Location of the IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue Hieber Building

*Street Address of the IRB (if different from the Mailing Address of the IRB):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

143

*Country (if outside the U.S.):

- D. Approximate number of full time equivalent positions devoted to the IRB's administrative activities:
- E. ◆Approximate number of all active protocols (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
- F. Approximate number of active protocols conducted or supported by HHS (e.g., the National Institutes of Health, Centers for Disease Control and Prevention, etc.) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or

continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):

- G. ‡For IRBs that review, or intend to review, protocols involving products regulated by the Food and Drug Administration (FDA) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
 - ‡i) Approximate number of active protocols involving FDA-regulated products:
 - ‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):
 - X human drugs food additives
 - **X** medical devices color additives
 - X biological other Specify:

H. IRB Chairperson

*First Name: **Richard** Middle Initial: *Last Name: **Guido**

Earned Degree(s): M.D. Title or Position: Chairman, IRB

Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue, Ground Level

City: Pittsburgh State/Province: PENNSYLVANIA Zip/Postal Code: 15213

Country (if outside the U.S.):

*Phone: 412 383-1480 FAX: 412 383-1508 *E-Mail: Guido@mail.magee.edu

I. ◆IRB Roster Form: Completion of the IRB Roster Form is required if your IRB is designated on a Federalwide assurance submitted to OHRP. Otherwise, it is optional.

| Member Name (Last, First) | Sex M/F | Earned Degree(s) | Scientist (S) Non-scientist (N) | Primary Scientific or Non-Scientific Specialty | Affiliation with Institution(s) Y/N | Comments |
|------------------------------|------------|---------------------|---------------------------------------|--|-------------------------------------|----------------------|
| Guido, Richard | M | M.D. | S | OB/GYN | Y | |
| Barone, Jean | F | CIP | N | IRB regulations | Y | |
| Beers, Susan | F | PhD | S | Pediatric neuropsychology | Y | |
| Hsieh, Margaret | F | MD | S | Emergency Medicine | Y | |
| Ryan, Christopher | M | PhD | S | psychology | Y | |
| Slagle, Nellie Lou | F | BA | N | non-scientist | Y | |
| Sweet, Robert | M | MD | S | psychiatry | Y | |
| Zelazny, Jamie | F | MPH, RN | S | psychiatric nursing | Y | |
| Shapiro, Ronald | M | MD | S | Transplant Surgery | Y | |
| Oliver, D. Lamar | M | BS | N | electrical engineering, non-scientist | N | |
| Katz, Aviva | F | MD | S | pediatric surgery | Y | |
| Zeh, Herbert | M | MD | S | surgical oncology | Y | |
| | | | Alternativ | ve Members | | |
| Lieberman, Frank | M | MD | S | Neuro-oncology | Y | any physician member |

NOTES:

Members whose training, background, and occupation would incline them to view scientific activities from the standpoint of someone within a behavioral or biomedical research discipline should be considered a scientist, while members whose training, background, and occupation would incline them to view research activities from a standpoint outside of any biomedical or behavioral scientific discipline should be considered a nonscientist. In addition, the IRB must have members with sufficient knowledge of the specific scientific discipline(s) relevant to the research that it reviews.

Affiliation: Please indicate whether or not each individual (or a member of that person's immediate family) is affiliated (other than as an IRB member) with the institution or organization operating the IRB.

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No = The individual is not affiliated with the institution or organization operating the IRB.

Alternate Members: An alternate member(s) may be designated, as needed, for a regular voting member(s). An alternate member may vote only when the regular voting member is not voting.

[X] Yes. Provide the IRB registration number previously assigned to this IRB by OHRP: IRB00004005

(This number was provided by OHRP the first time the IRB was registered with OHRP. If you do not know the IRB registration number, search for the IRB on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777)

- [] No, this is a new IRB registration.
- B. Provide the IRB name, if any, used by the institution or organization (e.g., State University Behavioral IRB, University Healthcare Biomedical IRB, or XYZ Hospital IRB #1):

U of Pittsburgh IRB #7 - G

C. Location of the IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue Hieber Building

*Street Address of the IRB (if different from the Mailing Address of the IRB):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

143

*Country (if outside the U.S.):

- D. Approximate number of full time equivalent positions devoted to the IRB's administrative activities:
- E. ◆Approximate number of all active protocols (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
- F. Approximate number of active protocols conducted or supported by HHS (e.g., the National Institutes of Health, Centers for Disease Control and Prevention, etc.) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or

continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):

- G. ‡For IRBs that review, or intend to review, protocols involving products regulated by the Food and Drug Administration (FDA) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
 - ‡i) Approximate number of active protocols involving FDA-regulated products:
 - ‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):
 - X human drugs food additives
 - **X** medical devices color additives
 - X biological other Specify:

H. IRB Chairperson

*First Name: **Aviva** Middle Initial: *Last Name: **Katz**

Earned Degree(s): M.D. Title or Position: Vice Chairman

Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue

City: Pittsburgh State/Province: PENNSYLVANIA Zip/Postal Code: 15213

Country (if outside the U.S.):

*Phone: 412 383-1480 FAX: 412 383-1508 *E-Mail: aviva.katz@chp.edu

I. ◆IRB Roster Form: Completion of the IRB Roster Form is required if your IRB is designated on a Federalwide assurance submitted to OHRP. Otherwise, it is optional.

| Member Name (Last, First) | Sex M/F | Earned Degree(s) | Scientist (S) Non-scientist (N) | Primary Scientific or Non-Scientific Specialty | Affiliation with Institution(s) Y/N | Comments |
|------------------------------|------------|---------------------|---------------------------------------|--|-------------------------------------|---------------------------|
| Katz, Aviva | M | M.D. | S | Child Psychiatry | Y | Comments |
| Howrie, Denise | F | PharmD | S | Pharmacy | Y | |
| Venkataraman, Shekhar | M | MD | S | pediatric critical care medicine | Y | |
| Puhalla, Shannon | F | MD | S | hematology/oncolog y | Y | |
| Burke, Jeffrey | M | PhD | S | child psychology | Y | |
| Martin, Judith | F | MD | S | Pediatric Infectious Diseases | Y | |
| Aubrecht, Jill | F | MBA, MSN, RN | S | MBA, MSN, RN | Y | |
| Jain, Samay | M | MD, MS | S | neurology, movement disoriders | Y | |
| Szanto, Katalin | F | MD | S | psychiatry | Y | |
| Cornelius, Jack | M | MD, MPH | S | psychiatry, addiction medicine | Y | |
| Levine, Myriam | F | BA | N | non-scientist, retired teacher | N | |
| Shuman, Nancy | F | BBA | N | business | N | |
| Handen, Benjamin | M | PhD | S | child psychology; autism | Y | |
| Harter, Nancy | F | N/A | N | research administration | Y | |
| Rubin, Joshua | M | MD | S | surgical oncology | Y | |
| Huppert, Theodore | M | PhD | S | radiology, MR research | Y | |
| George, Betsy | F | RN, PhD | S | tertiary, critical care | Y | |
| Jackson Graves, Carlyn | | BS | N | study coordination, GCP | Y | |
| Hollabaugh, Kim | F | MSN, RN | S | nursing, critical care | Y | |
| Jack, Pischke | M | MSW | N | incarceration, prisoner representative | Y | prisoner rep |
| | | | Alternativ | ve Members | | |
| Greenaway, Patty | F | RN, BSN | S | oncology nursing | Y | any other scientific memb |
| Holloway, Melanie | F | RN, BSN | S | pediatric nursing | Y | any other scientific memb |
| Carey, Tom | M | MSW, CIP | S | social work, IRB regulations | Y | any other scientific memb |
| Shatzer, Melanie | F | DNP, RN | S | cardiothoracic nursing & nursing ed | Y | any other scientist |

| DeSantes, Lisa | F | BS | N | IRB regulations, study coordination | Y | any non scientific membe |
|---------------------|---|-------------------|---|-------------------------------------|---|---|
| Doyle, William | M | PhD | S | pediatric otolaryngology | Y | prisoner representative, as scientific member |
| Wang, Norman | M | MD | S | cardiology, electrophysiology | Y | any physician member |
| Lee, Ann | F | MSN, CRNP, CIP | S | cardiology, heart/lung transplant | Y | any other scientific memb |
| Gangopadhyay, Nupur | M | DVM, MS, PhD | S | immunology and virology | Y | any other scientific memb |
| Lantz, Susan | F | MDiv | N | pastoral care | N | any non-scientific membe |

NOTES:

Members whose training, background, and occupation would incline them to view scientific activities from the standpoint of someone within a behavioral or biomedical research discipline should be considered a scientist, while members whose training, background, and occupation would incline them to view research activities from a standpoint outside of any biomedical or behavioral scientific discipline should be considered a nonscientist. In addition, the IRB must have members with sufficient knowledge of the specific scientific discipline(s) relevant to the research that it reviews.

Affiliation: Please indicate whether or not each individual (or a member of that person's immediate family) is affiliated (other than as an IRB member) with the institution or organization operating the IRB.

Yes = The IRB member is affiliated with the institution or organization operating the IRB.

No = The individual is not affiliated with the institution or organization operating the IRB.

Alternate Members: An alternate member(s) may be designated, as needed, for a regular voting member(s). An alternate member may vote only when the regular voting member is not voting.

[X] Yes. Provide the IRB registration number previously assigned to this IRB by OHRP: IRB00004006

(This number was provided by OHRP the first time the IRB was registered with OHRP. If you do not know the IRB registration number, search for the IRB on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777)

[] No, this is a new IRB registration.

B. Provide the IRB name, if any, used by the institution or organization (e.g., State University Behavioral IRB, University Healthcare Biomedical IRB, or XYZ Hospital IRB #1):

U of Pittsburgh IRB #8 - H

C. Location of the IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue Hieber Building

*Street Address of the IRB (if different from the Mailing Address of the IRB):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

*Country (if outside the U.S.):

- D. Approximate number of full time equivalent positions devoted to the IRB's administrative activities:
- E. Approximate number of all active protocols (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
- F. Approximate number of active protocols conducted or supported by HHS (e.g., the National Institutes of Health, Centers for Disease Control and Prevention, etc.) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):

- G. ‡For IRBs that review, or intend to review, protocols involving products regulated by the Food and Drug Administration (FDA) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
 - ‡i) Approximate number of active protocols involving FDA-regulated products:
 - ‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

X human drugs food additivesX medical devices color additives

X biological other

Specify:

H. IRB Chairperson

*First Name: Margaret Middle Initial: *Last Name: Hsieh

Earned Degree(s): **MD** Title or Position: **Chairman**

Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue

City: Pittsburgh State/Province: PENNSYLVANIA Zip/Postal Code: 15213

Country (if outside the U.S.):

*Phone: 412 383-1480 FAX: 412 383-1508 *E-Mail: hsiehm@upmc.edu

I. ◆IRB Roster Form: Completion of the IRB Roster Form is required if your IRB is designated on a Federalwide assurance submitted to OHRP. Otherwise, it is optional.

| Member Name (Last, First) | Sex M/F | Earned Degree(s) | Scientist (S) Non-scientist | Primary Scientific or Non-Scientific Specialty | Affiliation with Institution(s) | Comments |
|------------------------------|------------|---------------------|-----------------------------|--|---------------------------------|---------------------------|
| Hsieh, Margaret | F | MD | (N) S | Emergency | Y/N Y | Comments |
| Govil, Manika | F | PhD | S | Medicine craniofacial, statistical genetics | Y | |
| Pingpank, James | M | MD | S | surgical oncology | Y | |
| Moses-Kolko, Eydie | F | MD | S | Behavioral Health; PET | Y | |
| Watchko, Jon | M | MD | S | Newborn Medicine | Y | |
| Brandom, Barbara | F | MD | S | Pediatric Anesthesiology | Y | |
| Reiche, Teri | F | BS, CIP | N | IRB regulations | Y | |
| Brach, Jennifer | F | PhD | S | physcial therapy | Y | |
| Abt, John | M | PhD, ATC | S | sports medicine | Y | |
| McGough, Richard | M | MD | S | orthopedic surgery | Y | |
| Phillips, Brandi | F | MSPPM | N | non-scientist; healthcare administration | N | |
| Knapp, Beth | F | MS | N | Non-scientific | N | |
| Lee, Ann | F | MSN, CRNP, CIP | S | cardiology, heart/lung transplant | Y | |
| Canavan, Timothy | M | MD | S | OB/Gyn; ultrasound | Y | |
| Schonder, Kristine | F | PharmD | S | pharmacy and therapeutics, transplant | Y | |
| Conner, Ian | M | MD, PhD | S | ophthalmology | Y | |
| Valenta, Cindy | F | RN, MSN, CNRN | S | Critical Care, Neuro, Trauma | Y | |
| Cornelius, Jack | M | MD, MPH | S | psychiatry, addiction medicine | Y | |
| Johnson, Bruce | M | MD | S | pulmonary, critical care medicine | Y | |
| | | | Alternativ | ve Members | | |
| Seybert, Amy | F | PharmD | S | pharmacy and therapeutics | Y | any other scientific memb |
| DeSantes, Lisa | F | BS, CIP | N | IRB regulations | Y | any non-scientific membe |
| Hollabaugh, Kim | F | MSN, RN | S | nursing, critical care | Y | any other scientific memb |
| Greenaway, Patty | F | RN, BSN | S | oncology nursing | Y | any other scientific memb |
| Pischke, Jack | M | MSW | N | incarceration, prisoner representative | Y | |
| Carey, Tom | M | MSW, CIP | S | social work, IRB | Y | any other scientific memb |

NOTES:

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Alternate Members: An alternate member(s) may be designated, as needed, for a regular voting member(s). An alternate member may vote only when the regular voting member is not voting.

[X] Yes. Provide the IRB registration number previously assigned to this IRB by OHRP: IRB00004728

(This number was provided by OHRP the first time the IRB was registered with OHRP. If you do not know the IRB registration number, search for the IRB on the OHRP website at http://ohrp.cit.nih.gov/search/search.aspx or contact OHRP using the contact information at http://www.hhs.gov/ohrp/daqi-staff.html or by telephone at 1-866-447-4777)

[] No, this is a new IRB registration.

B. Provide the IRB name, if any, used by the institution or organization (e.g., State University Behavioral IRB, University Healthcare Biomedical IRB, or XYZ Hospital IRB #1):

IRB00004728 U of Pittsburgh IRB #9 – D

C. Location of the IRB

*Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue Hieber Building

*Street Address of the IRB (if different from the Mailing Address of the IRB):

*City: **Pittsburgh** *State/Province: **PENNSYLVANIA** *Zip/Postal Code: **15213**

*Country (if outside the U.S.):

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- E. Approximate number of all active protocols (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):
- F. Approximate number of active protocols conducted or supported by HHS (e.g., the National Institutes of Health, Centers for Disease Control and Prevention, etc.) (for purposes of completing this registration, an active protocol is any protocol for which the IRB conducted an initial review or continuing review at a convened meeting or under an expedited review procedure during the preceding 12 months):

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 - ‡i) Approximate number of active protocols involving FDA-regulated products:
 - ‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

X human drugs food additivesX medical devices color additives

X biological other

Specify:

H. IRB Chairperson

*First Name: Sue Middle Initial: *Last Name: Beers

Earned Degree(s): **PhD** Title or Position: **Chairman**

Mailing Address (if different from the Mailing Address in section 3):

3500 Fifth Avenue

City: Pittsburgh State/Province: PENNSYLVANIA Zip/Postal Code: 15213

Country (if outside the U.S.):

*Phone: 412 383-1480 FAX: 412 383-1508 *E-Mail: beerssr@upmc.edu

I. ◆IRB Roster Form: Completion of the IRB Roster Form is required if your IRB is designated on a Federalwide assurance submitted to OHRP. Otherwise, it is optional.

| Member Name (Last, First) | Sex M/F | Earned Degree(s) | Scientist (S) Non-scientist (N) | Primary Scientific or Non-Scientific Specialty | Affiliation with Institution(s) Y/N | Comments |
|------------------------------|------------|---------------------|---------------------------------------|--|-------------------------------------|---|
| Beers, Sue | F | PhD | S | pediatric neuropsychology | Y | |
| Gunawardena, Sriya | F | MD | S | Hematology/Oncolo gy | Y | |
| Shaikh, Nader | M | MD | S | Pediatrics | Y | |
| Squires, Janet | F | MD | S | child abuse, pediatric infectious diseas | Y | |
| Campbell, Susan | F | PhD | S | Psychology | Y | |
| Vieira, Alexandre | M | DDS, MS, PhD | S | genetics, dentistry | Y | |
| Choudry, M. Haroon | M | MD | S | surgical oncology | Y | |
| Lee, Ann | F | MSN, CRNP, CIP | S | cardiology, heart/lung transplant | Y | |
| Cipkala-Gaffin, Jan | F | DrPh, MN, RN | S | nursing, mental health | Y | |
| Drappatz, Jan | M | MD | S | neuro-oncology, oncology | Y | |
| Doi, Yohei | M | MD, PhD | S | infectious diseases | Y | |
| Ryan, Robert | M | EdD | N | non-scientific, volunteer work | N | |
| Kumer, Connie | F | MEd | N | non-scientist; public assistance | N | |
| Sperling, Mark | M | MD | S | Pediatrics, endocrinology | Y | |
| Finder, Jonathan | M | MD | S | pediatric pulmonology | Y | |
| Howrie, Denise | F | PharmD | S | pharmacy | Y | |
| Scott, Nancy | F | BA | N | non-scientific; medical technology | Y | |
| Kolko, David | M | PhD | S | child & adolescent psychiatry | Y | |
| Mandel, Ellen | F | MD | S | pediatric otolaryngology | Y | |
| | | | Alternativ | ve Members | | |
| Pasek, Tracy | F | RN, MSN | S | Pediatric ICU nursing | Y | any other scientific memb |
| Doyle, William | M | PhD | S | pediatric otolaryngology | Y | prisoner representative, as scientific member |
| Holloway, Melanie | F | RN, BSN, CIP | S | pediatric nursing, IRB regulations | Y | any other scientific memb |
| DeSantes, Lisa | F | BS | N | IRB regulations, study | Y | any non-scientific membe |

| coor | | |
|------|--|--|
| | | |

Pischke, Jack M MSW N incarceration Y prisoner representative

Hollabaugh, Kim F MSN, RN, CIP S nursing Y any other scientific memb

NOTES:

Members whose training, background, and occupation would incline them to view scientific activities from the standpoint of someone within a behavioral or biomedical research discipline should be considered a scientist, while members whose training, background, and occupation would incline them to view research activities from a standpoint outside of any biomedical or behavioral scientific discipline should be considered a nonscientist. In addition, the IRB must have members with sufficient knowledge of the specific scientific discipline(s) relevant to the research that it reviews.

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Public burden for this collection of information is estimated to average one hour for an initial IRB registration, and thirty minutes for updating or renewing the registration of a previously registered IRB. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: OS Reports Clearance Officer, Room 503, 200 Independence Avenue, SW., Washington, DC 20201. *Do not return the completed form to this address*.