

Submission#: **38764**
IORG#: **IORG0000196**
Institution: **U of Pittsburgh**

OMB No. 0990-0279
Approved for use through August 31, 2015

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)?

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
A** *Zip/Postal Code: **15261**

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

*Phone: **412 624-9111** *FAX: **412 624-6903** *E-Mail: **rjuhl@pitt.edu**

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.):

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

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

A. *Is this a renewal or update of a registration for an IRB already registered with HHS?

[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.):

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

D. ♦Approximate number of full time equivalent positions devoted to the IRB's administrative activities: **2**

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): **1284**

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): **143**

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: **40**

‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

- | | |
|---|-----------------|
| <input checked="" type="checkbox"/> human drugs | food additives |
| <input checked="" type="checkbox"/> medical devices | color additives |
| <input checked="" type="checkbox"/> biological | other |
- Specify:

H. IRB Chairperson

*First Name: **Judith** Middle Initial: *Last Name: **Martin**

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

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

3500 Fifth Avenue, Suite 106

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: **judy.martin@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
Martin, Judith	M	MD	S	OB/GYN	Y	
Dilts, Robert	M	PhD	N	Mathematics	Y	
Howland, Robert	M	MD	S	Psychiatry	Y	
Mitchell-O'Brien, Leeann	F	JD	N	Health and Hospital Law	N	
Soran, Ozlem	F	MD	S	Cardiology	Y	
Irrgang, James	M	PhD, PT, ATC	S	Orthopedics, PT, Rehabilitation	Y	
Dudjak, Linda	F	RN, PhD	S	nursing, oncology	Y	
Veraldi, Kristen	F	MD, PhD, FCCP	S	Pulmonary, Allergy, & CCM	Y	
DeSantes, Lisa	F	BS, CIP	N	IRB regulations, study coordination	Y	
Summersgill, Kurt	M	DDS, PhD	S	dental medicine, pathology	Y	
Raman, Venkataramanan	M	PhD	S	pharmacy	Y	
Yip, Lin	F	MD	S	surgical oncology, endocrine surgery	Y	
Comerci, John	M	MD	S	oncology, gynecology	Y	
Corcoran, Timothy	M	PhD	S	drug development, nuclear imaging	Y	
Schwartz, Miriam	F	none	N	support groups	N	
Alternative Members						
Valenti, Shannon	F	BS, MBA	N	Research regulations	Y	any non-scientific membe
Carey, Thomas	M	MSW, CIP	S	Social Work, IRB regulations	Y	any other scientific memt
Orndoff, Patricia	F	RN, MEd	S	Nursing	Y	any other scientific memt
Hurst, Kathleen	F	N/A	N	administrative	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
McKaveney, Theresa	F	BS	N	IRB regulations	Y	any non-scientific membe
Okonkwo, David	M	MD, PhD	S	neurosurgery	Y	any physician member
Grabowski, Erin	F	BS, CIP	N	IRB regulations, psychology	Y	any non-scientific membe
Brufsky, Adam	M	MD, PhD	S	Hematology/Oncology	Y	any physician member
Tan, Henkie	M	MD, PhD	S	Transplant Surgery	Y	any physician member

Wenzel, Sally	F	MD	S	Pulmonary, Allergy & Critical Care Medic	Y	any physician member
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
Navratil, Judith	F	BA	N	IRB regulations	Y	any non-scientific membe
Guido, Richard	M	MD	S	OB/GYN	Y	University of Pittsburgh I Executive Chairman
Pinsky, Michael	M	MD	S	pulmonary & critical care medicine	Y	any physician member
Nebes, Robert	M	PhD	S	geriatric psychiatry	Y	any other scientific memt
Patsy, Simon	F	RN, BS	S	pulmonary transplant, oncology	Y	any other scientific memt
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 memt
Lee, Ann	F	MSN, CRNP, CIP	S	cardiology, heart/lung transplant	Y	any other scientific memt
Holloway, Melanie	F	RN, BSN	S	pediatric nursing	Y	any other scientific memt
Manders, Ernest	M	MD	S	plastic & reconstructive surgery	Y	any physician member
Bhama, Jay	M	MD	S	cardiac surgery, cardiothoracic tx	Y	any physician member
Appleman, Leonard	M	MD	S	hematology/oncology	Y	any physician member
Moss, Deborah	F	MD	S	pediatrics	Y	any physician member
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.

When an institution or organization registers two or more IRBs, all alternate members for all IRBs may be listed on the roster of one IRB, or they may be listed separately with each IRB roster. A primary member of any IRB registered under the same IORG number may serve as an alternate for any comparably qualified member on any other IRB of that institution or organization. Primary members on registered IRBs serving as alternate members do not need to be listed as an alternate on any roster. Each alternate IRB member who replaces a primary member at any given meeting should have experience, expertise, background, professional competence, and knowledge equivalent to that of the primary IRB member whom the alternate will replace. Whenever an alternate member substitutes for a primary member of the IRB, the combined requirements of § 46.107(a) and 46.108(b) shall remain satisfied. Whenever this occurs, the minutes of the IRB meeting should indicate clearly that the alternate IRB member has replaced the designated primary IRB member, and include the identity of the replaced primary and the alternate members. If multiple alternate members serve at an IRB meeting, the pairing of primary and alternate members should be indicated.

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

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[] 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.):

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

D. ♦Approximate number of full time equivalent positions devoted to the IRB's administrative activities: **2**

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): **1284**

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‡i) Approximate number of active protocols involving FDA-regulated products: **40**

‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

- | | |
|---|-----------------|
| <input checked="" type="checkbox"/> human drugs | food additives |
| <input checked="" type="checkbox"/> medical devices | color additives |
| <input checked="" type="checkbox"/> 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	
Yanowitz, Toby	F	MD	S	neonatology, pediatrics	Y	
Olawaiye, Alexander	M	MD	S	OB/GYN, oncology	Y	
Chang, Judy	F	MD, MPH	S	OB/Gyn	Y	
Becker, Stacey	F	BS	S	cognitive psychology; Autism-Neurobiolog	Y	
Weyant, Donna	F	MSN, RN, CPN	S	pediatric nursing	Y	
Hilmi, Ibtesam	F	MB, CHB, FRCA	S	anesthesia	Y	
Hollabaugh, Kim	F	MSN, RN	S	nursing	Y	
Hathaway, Bridget	F	MD	S	otolaryngology	Y	
VanSwearingen, Jessie	F	PhD	S	physical therapy	Y	
Prasad, Konasale	M	MD	S	psychiatry, genetics	Y	
Hrynkiw, Nancy	F	BS	N	non-scientific community member	N	
Jonkman, Lauren	F	PharmD, MPH, BCPS	S	Pharmacy and therapeutics	Y	
Barnato, Amber	F	MD, MPH, MS	S	preventive medicine	Y	
Abt, John	M	PhD, ATC	S	sports medicine	Y	
Alternative Members						
Mathias, Ann	F	JD, MHSA	N	Corporate Compliance	Y	any non scientific membe
Gingrich, Jeffrey	M	MD	S	Urology	Y	any physician member
Engh, Johnathan	M	MD	S	Neurological surgery	Y	any other physician meml
Libman, Ingrid	F	MD, PhD	S	pediatric endocrinology	Y	any physician member
Rotondi, Armando	M	PhD	S	psychology, heath services systems	Y	any other scientific memt
McCormick, Nancy	F	BS, MS	N	research coordination, FDA regulations	Y	any non-scientific membe
Holloway, Melanie	F	RN, BSN, CIP	S	pediatric nursing	Y	any other scientific memt
Carey, Tom	M	MSW, CIP	S	Social work, IRB regulations	Y	any other scientific memt
Pischke, Jack	M	MSW	N	incarceration, social work, advocacy	Y	prisoner representative

Lee, Ann	F	MSN, RN, CRNP, CIP	S	cardiology, heart/lung tx	Y	any other scientific memb
Davis, Jan	F	RN, PhD, CRNP	S	cardiopulmonary nursing	Y	
DeSantes, Lisa	F	BS, CIP	N	IRB regulations, study coordination	Y	any non-scientific membe

NOTES:

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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.):

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

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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):

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‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

- | | |
|---|-----------------|
| <input checked="" type="checkbox"/> human drugs | food additives |
| <input checked="" type="checkbox"/> medical devices | color additives |
| <input checked="" type="checkbox"/> biological | other |
- Specify:

H. IRB Chairperson

*First Name: **Judith** Middle Initial: *Last Name: **Martin**

Earned Degree(s): **MD** Title or Position: **Vice 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: **judy.martin@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
Martin, Judith	M	MD	S	OB/Gyn	Y	
Oliver, D. Lamar	M	BS	N	electrical engineering, non-scientist	N	
Fink, Barbara	F	BS, MS	S	ophthalmology research	Y	
Gildengers, Ariel	M	MD	S	psychiatry	Y	
Schuchert, Matt	M	MD	S	Thoracic Surgery	Y	
Cipkala-Gaffin, Jan	F	DrPh, MN, RN	S	nursing, mental health	Y	
George, Betsy	F	RN, PhD	S	tertiary, critical care	Y	
Doi, Yohei	M	MD, PhD	S	infectious diseases	Y	
Harter, Nancy	F	n/a	N	research administration	Y	
Hilmi, Ibtesam	F	MBCHB, FRCA	S	anesthesia	Y	
Carey, Thomas	M	MSW	S	social work, IRB regulations	Y	
Venkataraman, Shekhar	M	MD	S	pediatric critical care	Y	
Jackson Graves, Carlynn	F	BS	N	study coordination, GCP	Y	
Goyal, Rakesh	M	MD	S	hematology / oncology, bone marrow tx	Y	
Alternative Members						
Holloway, Melanie	F	RN, BSN, CIP	S	pediatric nursing, IRB regulations	Y	any other scientific memt
McCormick, Nancy	F	BS, MS	N	Research Coordination, FDA regulations	Y	any non-scientific membe
Irrgang, James	M	PhD, PT, ATC	S	orthopaedics, PT, rehab	Y	any other scientific memt
Hollabaugh, Kim	F	MSN, RN, CIP	S	nursing	Y	any other scientific memt
DeSantes, Lisa	F	BS, CIP	N	IRB regulations	Y	any non scientific membe
Lee, Ann	F	MSN, CRNP, CIP	S	cardiology, heart/lung transplant	Y	any other scientist
Miklos, Melissa	F	BS, CIP	N	IRB regulations	Y	any non-scientist
Ryan, Christopher	M	PhD	S	psychology, IRB regulations	Y	any other scientist
Barone, Jean	F	CIP	N	IRB regulations	Y	any non-scientist
Hsieh, Margaret	F	MD	S	Emergency Medicine	Y	any physician member

Zelazny, Jamie	F	RN, MPH	S	psychiatric nursing	Y	any other scientific memb
Chang, Judy	F	MD, MPH	S	OB/GYN	Y	any physician member

NOTES:

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A. *Is this a renewal or update of a registration for an IRB already registered with HHS?

[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**

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

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

D. ♦Approximate number of full time equivalent positions devoted to the IRB's administrative activities: **2**

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): **1284**

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): **143**

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: **40**

‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

- | | |
|---|-----------------|
| <input checked="" type="checkbox"/> human drugs | food additives |
| <input checked="" type="checkbox"/> medical devices | color additives |
| <input checked="" type="checkbox"/> 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	
Slagle, Nellie Lou	F	BA	N	non-scientist	Y	
Sweet, Robert	M	MD	S	psychiatry	Y	
Hsieh, Margaret	F	MD	S	Emergency Medicine	Y	
Zelazny, Jamie	F	MPH, RN	S	psychiatric nursing	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	
Martin, Judith	F	MD	S	pediatric infectious disease	Y	
Alternative 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.

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.

When an institution or organization registers two or more IRBs, all alternate members for all IRBs may be listed on the roster of one IRB, or they may be listed separately with each IRB roster. A primary member of any IRB registered under the same IORG number may serve as an alternate for any comparably qualified member on any other IRB of that institution or organization. Primary members on registered IRBs serving as alternate members do not need to be listed as an alternate on any roster. Each alternate IRB member who replaces a primary member at any given meeting should have experience, expertise, background, professional competence, and knowledge equivalent to that of the primary IRB member whom the alternate will replace. Whenever an alternate member substitutes for a primary member of the IRB, the combined requirements of § 46.107(a) and 46.108(b) shall remain satisfied. Whenever this occurs, the minutes of the IRB meeting should indicate clearly that the alternate IRB member has replaced the designated primary IRB member, and include the identity of the replaced primary and the alternate members. If multiple alternate members serve at an IRB meeting, the pairing of primary and alternate members should be indicated.

A. *Is this a renewal or update of a registration for an IRB already registered with HHS?

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**

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

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

D. ♦Approximate number of full time equivalent positions devoted to the IRB's administrative activities: **3**

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): **1285**

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

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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:

40

‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

- | | |
|---|-----------------|
| <input checked="" type="checkbox"/> human drugs | food additives |
| <input checked="" type="checkbox"/> medical devices | color additives |
| <input checked="" type="checkbox"/> 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	
Howrie, Denise	F	PharmD	S	Pharmacy	Y	
Venkataraman, Shekhar	M	MD	S	pediatric critical care medicine	Y	
Rubin, Joshua	M	MD	S	surgical oncology	Y	
Parikh, Rahul	M	MBBS, PhD	S	medical oncology, internal medicine	Y	
Huppert, Theodore	M	PhD	S	radiology, MR research	Y	
Jain, Samay	M	MD, MS	S	neurology, movement disorders	Y	
Levine, Myriam	F	BA	N	non-scientist, retired teacher	N	
Shuman, Nancy	F	BBA	N	business	N	
Puhalla, Shannon	F	MD	S	hematology/oncolog y	Y	
Szanto, Katalin	F	MD	S	psychiatry	Y	
Cornelius, Jack	M	MD, MPH	S	psychiatry, addiction medicine	Y	
Lee, Ann	F	MSN, CRNP, CIP	S	cardiology, heart/lung transplant	Y	
Carpenter, Karli	F	RN, BSN, MSN, MBA	S	pediatric emergency medicine	Y	
Ho, Ken	M	MD, MPH	S	Infectious Diseases	Y	
Hale, Jennifer	F	BA	N	community member	N	
Armstrong, Michaele	F	PhD	S	human genetics, endocrine surgery	Y	
Alternative Members						
Lantz, Susan	F	MDiv	N	pastoral care	N	any non-scientific membe
Doyle, William	M	PhD	S	pediatric otolaryngology	Y	prisoner representative, ar scientific member
Holloway, Melanie	F	RN, BSN	S	pediatric nursing	Y	any other scientific membt
DeSantes, Lisa	F	BS	N	IRB regulations, study coordination	Y	any non-scientific membe
Hollabaugh, Kim	F	MSN, RN	S	nursing, critical care	Y	any other scientific membt
Wang, Norman	M	MD	S	cardiology, electrophysiology	Y	any physician member
Handen, Benjamin	M	PhD	S	child psychology; autism	Y	any other scientific membt
Carey, Tom	M	MSW, CIP	S	social work, IRB	Y	any other scientific membt

Jack, Pischke	M	MSW	N	regulations incarceration, prisoner representative	Y	any non sci; prisoner rep
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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.

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A. *Is this a renewal or update of a registration for an IRB already registered with HHS?

[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.):

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

D. ♦Approximate number of full time equivalent positions devoted to the IRB's administrative activities: **3**

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): **1285**

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): **144**

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: **41**

‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

- | | |
|---|-----------------|
| <input checked="" type="checkbox"/> human drugs | food additives |
| <input checked="" type="checkbox"/> medical devices | color additives |
| <input checked="" type="checkbox"/> 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 (N)	Primary Scientific or Non-Scientific Specialty	Affiliation with Institution(s) Y/N	Comments
Hsieh, Margaret	F	MD	S	Emergency Medicine	Y	
Knapp, Beth	F	MS	N	Non-scientific	N	
Phillips, Brandi	F	MSPPM	N	non-scientist; healthcare administration	N	
McGough, Richard	M	MD	S	orthopedic surgery	Y	
Reiche, Teri	F	BS, CIP	N	IRB regulations	Y	
Moses-Kolko, Eydie	F	MD	S	Behavioral Health; PET	Y	
Govil, Manika	F	PhD	S	craniofacial, statistical genetics	Y	
Pingpank, James	M	MD	S	surgical oncology	Y	
Watchko, Jon	M	MD	S	Newborn Medicine	Y	
Brandom, Barbara	F	MD	S	Pediatric Anesthesiology	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	
Canavan, Timothy	M	MD	S	OB/Gyn; ultrasound	Y	
Holloway, Melanie	F	RN, BSN, CIP	S	pediatric nursing	Y	any other scientific member
Schonder, Kristine	F	PharmD	S	pharmacy and therapeutics, transplant	Y	
Houston, Neil	M	BA	S	Medical Student, Dermatology	Y	
Conner, Ian	M	MD, PhD	S	ophthalmology	Y	
Alternative Members						
Seybert, Amy	F	PharmD	S	pharmacy and therapeutics	Y	any other scientific memt
Brach, Jennifer	F	PhD	S	physcial therapy	Y	any other scientific memt
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 memt
Lee, Ann	F	MSN, CRNP, CIP	S	cardiology, heart/lung transplant	Y	any other scientific memt
Carey, Tom	M	MSW, CIP	S	social work, IRB regulations	Y	any other scientific memt

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.

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A. *Is this a renewal or update of a registration for an IRB already registered with HHS?

[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.):

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

D. ♦Approximate number of full time equivalent positions devoted to the IRB's administrative activities: **2**

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): **1285**

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): **144**

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: **41**

‡ii) Types of FDA-regulated products involved in FDA protocols include (check all that apply):

- | | |
|---|-----------------|
| <input checked="" type="checkbox"/> human drugs | food additives |
| <input checked="" type="checkbox"/> medical devices | color additives |
| <input checked="" type="checkbox"/> 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	
Squires, Janet	F	MD	S	child abuse, pediatric infectious diseases	Y	
Shaikh, Nader	M	MD	S	Pediatrics	Y	
Ryan, Robert	M	EdD	N	non-scientific, volunteer work	N	
Sperling, Mark	M	MD	S	Pediatrics, endocrinology	Y	
Kumer, Connie	F	MEd	N	non-scientist; public assistance	N	
Kolko, David	M	PhD	S	child & adolescent psychiatry	Y	
Howrie, Denise	F	PharmD	S	pharmacy	Y	
Finder, Jonathan	M	MD	S	pediatric pulmonology	Y	
Scott, Nancy	F	BA	N	non-scientific; medical technology	Y	
Mandel, Ellen	F	MD	S	pediatric otolaryngology	Y	
Drappatz, Jan	M	MD	S	neuro-oncology, oncology	Y	
Pischke, Jack	M	MSW	N	incarceration	Y	prisoner representative
Pasek, Tracy	F	RN, MSN	S	Pediatric ICU nursing	Y	
Choudry, M. Haroon	M	MD	S	surgical oncology	Y	
Hollabaugh, Kim	F	MSN, RN, CIP	S	nursing	Y	
Vieira, Alexandre	M	DDS, MS, PhD	S	genetics, dentistry	Y	
Alternative Members						
Doyle, William	M	PhD	S	pediatric otolaryngology	Y	prisoner representative, a scientific member
Lee, Ann	F	MSN, CRNP, CIP	S	cardiology, heart/lung transplant	Y	any other scientific memt
DeSantes, Lisa	F	BS	N	IRB regulations, study coordination	Y	any non-scientific membe
Carey, Thomas	M	MSW	S	social work, IRB regulations	Y	any other scientific memt
Holloway, Melanie	F	RN, BSN, CIP	S	pediatric nursing, IRB regulations	Y	any other scientific memt

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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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.*