Ad hoc advisor: a person with relevant and competent knowledge and expertise consulted by an Research Ethics Board (REB) for a specific research ethics review, and for the duration of that review, in the event that the REB members lack specific expertise or knowledge to review with competence the ethical acceptability of a research proposal. The ad hoc advisor is not a member of the REB and is not counted in the quorum or allowed to vote on REB decisions.

Adverse Drug Reaction (ADR): all noxious and unintended responses to an investigational product related to any dose should be considered adverse drug reactions. The phrase “responses to an investigational product” means that a causal relationship between the investigational product and an adverse event is at least a reasonable possibility (i.e., the relationship cannot be ruled out).

Adverse Event (AE): any untoward medical occurrence in a research participant administered an investigational product and which does not necessarily have a causal relationship with this treatment. An AE can therefore be any unfavourable and unintended sign (including an abnormal laboratory finding, for example), symptom, or disease temporally associated with the use of an investigational product, whether or not related to the investigational product.

Alternate member: a formally appointed voting member of the Research Ethics Board (REB) who may substitute for a regular member of the REB but who is not expected to attend every REB meeting. An alternate REB member’s presence at the REB meeting in the place of an absent regular REB member is used to establish quorum.

Amendment: a written description of a modification or change(s) to the previously approved research study. Amendments include any changes to the protocol or related research documents, such as changes to the consent form, revisions to the Investigator Brochure, updated participant material, etc.

Assent: affirmative agreement to participate in research by an individual unable to provide consent.

As soon as reasonably possible (see also “Promptly”): the term “as soon as reasonably possible” means that the timing of reporting will vary in accordance with the severity/seriousness of the information being reported, including the nature of the research associated with the problem. Unless, however, the event is a routine safety letter, DSMB report, summary report or changes to the Investigator’s brochure that are minor and/or routine
in nature, all new information and unanticipated problems must be reported within seven
days of the incident, occurrence, outcome event, or the Investigator’s receipt of the notice of
the event or the new information.

**Authorized signatory:** individual(s) authorized to sign documents on behalf of an organization.

**Authorized third party:** any person with the necessary authority to make decisions on behalf of
the prospective participant who lacks the capacity to consent to participate, or to continue to
participate, in a particular research project. (Also known as a “legally acceptable
representative” or “substitute decision-maker”).

**Confidentiality:** refers to the agreement between the Researcher and the participant as to how
personal data will be managed and used, and an ethical and/or legal responsibility to safeguard
information from unauthorized use, disclosure, modification, loss or theft. The term also refers
to the REB’s ethical and/or legal responsibility to safeguard information in its custody from
unauthorized use, disclosure, modification, loss or theft.

**Conflict of Interest (COI):** circumstance of a person (e.g., Researcher or Research Ethics Board
(REB) member) or organization in a real, perceived or potential conflict between their duties or
responsibilities related to research and their personal, institutional or other (secondary)
interests.

Example: COI may occur when an individual’s judgments and actions or an organization’s
actions in relation to research are, or could be, affected by personal, organizational or other
interests, including, but not limited to, business, commercial or financial interests, whether of
individuals, their family members, their friends, or their former, current or prospective
professional associations or of the organization itself.

Examples of secondary interests for a Researcher include the following:

- Is receiving or expecting to receive compensation from the sponsor in which the value
  of the compensation could be affected by the outcome of the study;
- Acts as an officer, director, or agent of the sponsor;
- His/her job status or compensation is impacted by the research (e.g., payment for
  speaking or leading study groups on behalf of the sponsor);
- Is receiving a finder’s fee for the recruitment of research participants;
- Has a proprietary interest (e.g., patent, trademark, copyright interest, licensing
  agreement) in the tested product;
- Has (or family, spouse, close relationships) any equity interest in the sponsor;
- Receives payments of other sorts, which are made by the sponsor exclusive of the costs
  of conducting the clinical research (e.g., a grant to fund ongoing research, compensation
  in the form of equipment or retainers for ongoing consultation or honoraria);
- Is intending to recruit his/her own patients as research participants;
• Has identified him or herself for any other reason as having a conflicting interest (i.e., organizational conflict that may impact the research).

Examples of secondary interests for an REB member include the following:
• Is a Researcher or sub-Researcher on the protocol;
• Is directly involved in the conduct of the research;
• His/her job status or compensation is impacted by the research (e.g. research coordinator, payment for speaking/leading study groups on behalf of the sponsor);
• Is receiving or expecting to receive compensation from the sponsor in which the value of the compensation could be affected by the outcome of the study;
• Acts as an officer, director, or agent of the sponsor;
• Has a proprietary interest (e.g., patent, trademark, copyright interest, licensing agreement) in the tested product;
• Has any equity interest in the sponsor that when aggregated for the member and the member's spouse and dependent children;
• Any equity interest in the sponsor (i.e., any ownership interest, stock options, or other financial interest whose value cannot be readily determined through reference to public prices);
• Significant payments of other sorts, which are payments made by the sponsor exclusive of the costs of conducting the clinical research (e.g., a grant to fund ongoing research, compensation in the form of equipment or retainers for ongoing consultation or honoraria);
• Is in direct competition with the Researcher of the research project for limited resources, funding, sponsorship, or research participants; acts as a consultant for the sponsor; is considered a personal or professional adversary of the Researcher;
• Has identified him or herself for any other reason as having a conflicting interest.

Continuing non-compliance: Continuing non-compliance is a pattern of non-compliance that indicates an unwillingness to comply or a lack of knowledge that may lead to an adverse effect on the rights and welfare of participants or may place participants at an increased risk of harm.

Continuing research ethics review (also referred to as “continuing review”): any review of ongoing research conducted by a Research Ethics Board (REB) occurring after the date of initial REB approval and continuing throughout the life of the project to ensure that all stages of a research project are ethically acceptable in accordance with the principles in the Policy.

Controlled forms: documents that require formal change control, and that form part of the permanent record of Research Ethics Board (REB) operations and processes.

Data and Safety Monitoring Board (DSMB): a multi-disciplinary, expert advisory group established by a research sponsor, that is responsible for safeguarding the interests of participants by reviewing emerging data, assessing the safety and efficacy of research procedures, and monitoring the overall conduct of the research.
**Delegated review (also referred to as expedited review)**: the level of Research Ethics Board (REB) review assigned to minimal risk research studies, to minor changes in approved research and to continuing review applications that meet the delegated review criteria. Delegated reviewers are selected from among the REB membership to conduct the review.

**Designee**: may refer to a member of the Research Ethics Board (REB) or to the REB Office Personnel depending on the context of the statement and the accompanying requirements of the organization.

**Expiry date**: the first day that the Research Ethics Board (REB) approval of the research is no longer valid without further review and approval by the REB. When the REB determines that review more than annually is required, the expiration date will be determined by the REB (e.g., six months from the date of the approval).

**Full Research Ethics Board (REB) review**: the level of Research Ethics Board (REB) review assigned to above minimal risk research studies. Conducted by the full membership of the REB, it is the default requirement for the ethics review of research involving human participants.

**Human genetic research**: the study of genetic factors responsible for human traits and the interaction of those factors with each other, and with the environment.

**Impartial**: without prejudice or bias, fair; a principle of justice holding that decisions should be based on objective criteria, rather than on the basis of bias, prejudice, or preferring the benefit to one person over another.

**Impracticable**: incapable of being put into practice due to a degree of hardship or onerousness that jeopardizes the conduct of the research; it does not mean mere inconvenience.

**Incentive**: anything offered to research participants, monetary or otherwise, to encourage participation in research.

**Incidental findings**: unanticipated discoveries made in the course of research that are outside the scope of the research. Material incidental findings are findings that have been interpreted as having significant welfare implications for the participant, whether health-related, psychological or social. If, in the course of research, material incidental findings are discovered, Researchers have an obligation to inform the participant.

**Inspection**: a systematic examination and evaluation of study-related activities and documents in comparison to specified requirements and standards.

**Institutional conflicts of interest**: an incompatibility between two or more substantial institutional obligations that cannot be adequately fulfilled without compromising one or another of the obligations.
**Investigational product:** refers to new or new uses of drugs, biologics, medical devices or natural health products.

**Local (Internal) Adverse Event:** local adverse events are those adverse events experienced by research participants enrolled by the investigator(s) at one or more centres under the jurisdiction of the REB. In the context of a single-centre clinical trial, all adverse events would be considered local adverse events.

**Mature minor:** is an individual who demonstrates adequate understanding and decision-making capacity.

**Medical Device Serious Adverse Event:** an adverse event associated with a medical device complaint meets the criteria of a medical device SAE when the event involves a medical device and results in death or serious deterioration in state of health. “Serious deterioration in the state of health” means: a life-threatening disease, disorder or abnormal physical state; the permanent impairment of a body function or permanent damage to a body structure; or a condition that necessitates an unexpected medical or surgical intervention to prevent such a disease, disorder or abnormal physical state or permanent impairment or damage.

**Medical device trials:** clinical trials that test the safety and/or efficacy of one or more instruments used in the prevention, diagnosis, mitigation, or treatment of a disease or abnormal physical condition or the restoration, correction or modification of body function or structure.

**Minimal risk:** research in which the probability and magnitude of possible harms implied by participation in the research is no greater than those encountered by participants in those aspects of their everyday life that relate to the research.

**Minor Changes:** any change that would not materially affect an assessment of the risks and benefits of the research or the integrity of the data, and does not substantially change the specific aims or design of the study.

**Multi-centred:** multi-centre means that the research is reasonably expected to be conducted at more than one centre.

**Natural health product (NHP) trial:** a clinical trial testing the safety and/or efficacy of one or more natural health products (NHP). The term NHP is used to describe substances such as vitamins and minerals, herbal medicines, homeopathic preparations, energy drinks, probiotics, and many alternative and traditional medicines.

**New Information:** any information that might adversely affect the safety or well being of the study participants, the conduct of the trial, or the participant’s willingness to continue in a
study. New information includes but is not limited to any relevant recent literature, interim findings, preliminary results of the study or of any other study (e.g. using the same drug).

**Non-compliance**: failure to follow applicable guidelines and regulations governing human participant research; failure to follow the protocol approved by the Research Ethics Board (REB), or failure to follow stipulations imposed by the REB as a condition of approval.

**Non-controlled forms**: documents that are not part of the permanent record of Research Ethics Board (REB) operations and processes. Non-controlled forms also will contain version dates.

**Non-Local (External) Adverse Event**: from the perspective of the REB overseeing one or more centres engaged in a multi-centre clinical trial, external adverse events are those adverse events experienced by research participants enrolled by investigator(s) at other centres/institutions outside the REB’s jurisdiction.

**Ongoing research**: research that has received Research Ethics Board (REB) approval and has not yet been completed.

**Organizational Official**: a senior official who signs an organization’s human participants’ assurance, making a commitment on behalf of the organization to comply with 45 CFR Part 46, the US Code of Federal Regulations covering protection of human participants, and with Health Canada regulations.

**Participant**: an individual whose data or responses to interventions, stimuli, or questions by a Researcher are relevant to answering a research question; also referred to as “human participant” and in other policies/guidance as “subject” or “research subject.”

**Periodic Safety Update Report**: a summary report, created at least semi-annually, by a study sponsor, listing all of the suspected unexpected serious adverse reactions (SUSARs) that have occurred in that reporting period and that also includes a concise summary highlighting the main points of concern and the evolving safety profile of the investigational product.

**Personal health information**: Personal health information (PHI), is a subset of Personal information, which is identifiable information about an individual. (See Identifiable information described under Personal information). Personal health information is identifying information about an individual in either an oral or in a recorded form, if the information:

- Relates to the individual’s physical or mental health, including family health history;
- Relates to the provision of health care, including the identification of persons providing care;
- Is a plan of service for an individual requiring long-term care;
- Relates to payment or eligibility for health care;
- Relates to the donation of body parts or bodily substances or is derived from the testing, or examination of such parts or substances;
• Is the individual’s health number; or
• Identifies an individual’s substitute decision-maker.

Any other information about an individual that is included in a record containing personal health information is also included in this definition. This definition does not include information about an individual if the information could not reasonably be used to identify the individual.

**Personal information (also referred to as “identifiable information”):** information that identifies an individual and/or for which it is foreseeable that may reasonably be expected to identify an individual, alone or in combination with other available information.

**Directly identifying information:** the information identifies a specific individual through direct identifiers (e.g., name, social insurance number, personal health number).

**Indirectly identifying information:** the information can reasonably be expected to identify an individual through a combination of indirect identifiers (e.g., date of birth, place of residence, or unique personal characteristic).

**Coded information:** direct identifiers are removed from the information and replaced with a code. Depending on access to the code, it may be possible to re-identify specific participants (e.g., the Researcher retains a list that links the participant’s code name with their actual name so data can be re-linked if necessary).

**Anonymized information:** the information is irrevocably stripped of direct identifiers, a code is not kept to allow future re-linkage, and risk of re-identification of individuals from remaining indirect identifiers is low or very low.

**Anonymous information:** the information never had identifiers associated with it (e.g., anonymous surveys) and risk of identification of individuals is low or very low.

**Privacy:** an individual’s right to be free from intrusion or interference by others. Privacy refers to persons and their interest in controlling the access of others to themselves (their personal information).

**Privacy breach:** the unauthorized collection, use, or disclosure of personal information or personal health information (PHI) in the custody and control of an individual or a Health Information Custodian (HIC) or in the custody and control of the organization or its affiliated partners.

**Promptly (see also “As soon as reasonably possible”):** the regulations at 45 CFR 46.103(a) and (b)(5) do not specify a time frame for reporting incidents, except “promptly.” For a more serious incident, this may mean reporting to OHRP within days\(^1\). For a less serious incident, a
few weeks may be sufficient. It may be appropriate to send an initial report, and indicate that a follow-up or final report will follow by the earlier of:

- A specific date, or
- When an investigation has been completed or a corrective action plan has been implemented.

**Proportionate approach to research ethics review:** the assessment of foreseeable risk to determine the level of scrutiny the research will receive (i.e., delegated review for minimal risk research or full Research Ethics Board (REB) review for research above minimal risk), as well as the consideration of foreseeable risks, potential benefits, and ethical implications of the research in the context of initial and continuing review.

**Protocol Deviation:** the term protocol deviation is not well defined by regulations or guidelines, but deviations are identified as any unplanned or unforeseen change to a Research Ethics Board (REB) approved protocol or protocol procedures. Deviations are different from amendments in that they generally apply to a single occurrence or participant and are not intended at the time to modify the entire protocol.

**Quorum:**
Quorum shall include at least five (5) voting members, including (at minimum):

- two (2) members with expertise in the relevant disciplines, fields and methodologies covered by the REB (for biomedical clinical trials, this will include at least one member who practices medicine or dentistry and who is in good standing with their regulatory body),
- one (1) member who is primarily experienced in non-scientific disciplines,
- one (1) member knowledgeable in ethics,
- one (1) member from the community who has no affiliation with the organization(s) and who is not part of the immediate family of a person who is affiliated with the organization,
- one (1) member knowledgeable in the relevant law (for biomedical research) additional representation as required by applicable legislation or guidelines.

For research subject to the US Code of Federal Regulations, quorum shall also include a majority (50%+1) of voting members.

**Reportable event:** includes anything that could significantly impact the conduct of the research or alter the Research Ethics Board’s (REB) approval or favourable opinion to continue the research.

**Research:** an undertaking intended to extend knowledge through a disciplined inquiry or systematic investigation.
**Researcher**: the leader of a research team who is responsible for the conduct of the research, and for the actions of any member of the research team. (Also known as “Qualified Investigator”).

**Research Ethics Board (REB)**: a body of Researchers, community members, and others with specific expertise (e.g., in ethics, in relevant research disciplines) established by an organization to review the ethical acceptability of all research involving humans conducted within the organization’s jurisdiction or under its auspices.

**Research Ethics Board (REB) of record**: the Research Ethics Board (REB) that has been granted ultimate authority for the ethics review and oversight of a research study.

**Risk**: the possibility of the occurrence of harm. The level of foreseeable risk posed to participants by their involvement in research is assessed by considering the magnitude or seriousness of the harm and the probability that it will occur, whether to participants or to third parties.

**Serious Adverse Event/Experience (SAE) or Reaction**: any untoward medical occurrence that at any dose:
- results in death;
- is life-threatening;
- requires inpatient hospitalization or prolongation of existing hospitalization;
- results in persistent or significant disability/incapacity;
- is a congenital anomaly/birth defect;
- based upon appropriate medical judgment, is an important medical event that may jeopardize the study participant or may require medical intervention to prevent one of the outcomes listed above.

**Serious non-compliance**: serious non-compliance is non-compliance that adversely affects the rights and welfare of participants or places participants at increased risk of harm.

**Suspension**: a temporary or permanent halt to all research activities pending future action by the Research Ethics Board (REB), by the sponsor and/or by the Researcher.

**Termination**: a permanent halt by the Research Ethics Board (REB), by the sponsor and/or by the Researcher to all or some research activities.

**Unanticipated issues**: issues that occur during the conduct of research; may increase the level of risk to participants or have other ethical implications that may affect participants’ welfare; and were not anticipated by the Researcher in the research proposal submitted for research ethics review.
**Unanticipated Problems**: unanticipated problems are any incident, experience, or outcome that meet all of the following criteria:

1. **Unexpected** (in terms of nature, severity, or frequency) given the research procedures that are described in the protocol-related documents, and b) the characteristics of the population being studied;
2. **Related or possibly related** to participation in the research (possibly related means there is a reasonable possibility that the incident, experience, or outcome may have been caused by the drugs, devices, or procedures involved in the research); and
3. Suggests that the research places participants or others at a greater risk of harm (including physical, psychological, economic or social harm) than was previously known or recognized, or that were not described in the original application.

**Unexpected**: an event is “unexpected” when its specificity and severity are not accurately reflected in the protocol-related documents such as the Research Ethics Board (REB) approved research protocol, the Investigator Brochure, or the current REB approved informed consent document, or other relevant sources of information such as product labelling and package inserts; or when the event is not associated with the expected natural progression of any underlying disease, disorder, predisposing risk factor, or condition of the participant(s) experiencing the adverse event.

**Related to the research procedures**: an event is “related to the research procedures” if in the opinion of the Researcher or sponsor, the event was more likely than not to be caused by the research procedures.

Unanticipated problems include anything that could significantly impact the conduct of the study or alter the REBs approval or favourable opinion to continue the study.

Unanticipated problems include, but are not limited to:

- Serious unexpected adverse events / drug reactions (including medical device serious adverse events);
- A breach of confidentiality or privacy;
- Problems with the investigator or study personnel;
- Fire flood or other natural disaster;
- Incidents of continuing and serious noncompliance with the ICH-GCPs, REBs requirements or applicable laws and regulations;
- Termination or suspension of the study by a regulatory authority;
- Any complaint by a participant that includes a report of an unanticipated risk or which cannot be resolved by the research staff;
- Protocol deviations that in the opinion of the Investigator places one or more participants at increased risk, or affects the rights, safety or welfare of research participants;
- For an “expected” serious adverse drug reaction, an increase in the rate of occurrence which is judged to be clinically important;
- A significant hazard to the research participant populations such as lack of efficacy with an investigational product used in treating life-threatening disease;
- A major safety finding from a newly completed animal study that suggests a significant risk for human participants (such as carcinogenicity);
- Recommendations of the Data and Safety Monitoring Committee, where relevant for the safety of the research participants;
- Protocol deviations / violations that impact data integrity or the safety of research participants.

**Unexpected Adverse Drug Reaction:** An adverse reaction, the nature or severity of which is not consistent with the applicable product information (e.g. the Investigator’s Brochure for an unapproved investigational product). Reports which add significant information on specificity or severity of a known, already documented serious ADR constitute unexpected events. For example, an event more specific or more severe than described in the Investigator's Brochure would be considered "unexpected". Specific examples would be (a) acute renal failure as a labeled ADR with a subsequent new report of interstitial nephritis and (b) hepatitis with a first report of fulminant hepatitis.