



TITLE: Maintenance of Policies

POLICY NUMBER: IRB-101

REVISION NUMBER: 1.0

APPROVED DATE: 12/10/2025

A. PURPOSE

This Policy outlines the procedures for the creation, revision, dissemination, and training related to Policies within the Oklahoma State University (OSU) Institutional Review Board (IRB) and University Research Compliance (URC). Ensuring consistent and compliant IRB oversight of human subjects research is its central objective.

B. SCOPE

This Policy applies to all IRB personnel and appropriate staff within the Office of University Research Compliance at OSU.

C. REFERENCES

45 CFR 46.108(a)(3)
21 CFR 56.108, 56.109, 56.113
Office of Human Research Protections (OHRP) Guidance

D. DEFINITIONS

URC: University Research Compliance
IRB: Institutional Review Board

E. ROLES AND RESPONSIBILITIES

The IRB Manager is responsible for establishing intervals for the timely review of Policies and for periodically reviewing and modifying (as appropriate) OSU policies pertaining to research involving human subjects.

The IRB Manager and IRB Chair (or his/her designee) are responsible for periodically reviewing and suggesting modifications as appropriate to the IRB's Policies.



F. PROCEDURE

1.1. Review, Revision, Approval of Standard Operating Procedures

- 1.1.1. Changes to regulations, federal guidelines, or research practice as well as the policies and procedures of OSU may require a new Policy or revision of a previously issued Policy.
- 1.1.2. Policies will be reviewed by the appropriate OSU official(s) at regular intervals established by the Assistant Vice President for Research Compliance who manages the Office of University Research Compliance (URC). At a minimum, review of policies shall take place at least once every three (3) years or more frequently as required by regulatory changes, institutional needs, or audit findings, to ensure compliance with applicable regulations including 45 CFR 46 and OHRP guidance. New or revised Policies will be reviewed initially by the IRB Manager, the IRB Chair, and the Assistant Vice President for Research Compliance. A final draft will be distributed to the IRB for comment and acceptance.

1.2 Policy Dissemination and Training

- 1.2.1. When new or revised Policies are approved, they will be disseminated to the appropriate individuals and departments via email or mail and will be available on the Office of University Research Compliance website.
- 1.2.2. Training will be provided to all members of the IRB and IRB staff on new and revised Policies. The IRB meeting minutes document the training and attendees.
- 1.2.3. Each new IRB member or IRB office staff employee must review all applicable Policies prior to undertaking any responsibilities with the IRB. Evidence of training will be documented and filed by the IRB Manager.

G. SUPPLEMENTAL PROCEDURES (see current versions of Policies)

This Policy affects all other IRB Policies.



H. REVISION HISTORY

Date	Revision Number	Description of Changes
5/5/2025	1	<ul style="list-style-type: none">• Revised the Policy reviews to take place at least every 3 years or more frequently as required by regulatory changes, institutional needs, or audit findings, to ensure compliance with applicable regulations including 45 CFR 46 and OHRP guidance.• Remove that the OSU Institutional Official (IO) is responsible for granting final approval to new and revised SOPs/Policies for the IRB and requires their signature• Remove the following attachments as they are no longer needed/applicable: SOP Revision Worksheet, SOP Review Meeting Template, SOP Revision Log, Forms Revision Log• Merged the previous SOP to the new draft template
10/3/2025	1	Changed document from SOP to Policy to clarify scope and applicability.