Institutional Profile

Site Name: Adventist Health System, Sunbelt, Inc. dba AdventHealth Orlando

Last modified date: 05/08/2018

ABOUT THE INSTITUTIONAL PROFILE
The IREx IP contains basic information about your institution that another institution might use to determine if they feel comfortable relying on, or serving as the Reviewing IRB for, your institution. The IP can also be used by IRBs and study teams to better understand one's institutional processes and requirements when using reliance. This information will be visible to other users in IREx and publicly available as a downloadable PDF on the IREx Website [here](#). This information is for general review purposes only. It may not be accurate and may be subject to change, withdrawn or revised at any time without notice. The Institutional Profile is not intended to serve as a complete record of an Institution's study-specific local considerations.

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Section 1: GENERAL HRPP INFORMATION

<table>
<thead>
<tr>
<th>Institution</th>
<th>AdventHealth-Orlando</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federalwide Assurance (FWA)</td>
<td>FWA00002060</td>
</tr>
<tr>
<td>Expiration Date</td>
<td>2024-01-28</td>
</tr>
<tr>
<td>Does your institution have an IRB?</td>
<td>Yes</td>
</tr>
<tr>
<td>IRB Registry Number(s)</td>
<td>Panel A: 00000842 Panel B: 00008071</td>
</tr>
<tr>
<td>Is the IRB AAHRPP accredited?</td>
<td>Yes</td>
</tr>
<tr>
<td>Does your institution REQUIRE institutions to be AAHRPP accredited in order to serve as their IRB of Record (all the time)?</td>
<td>Yes</td>
</tr>
<tr>
<td>Describe any board specialties of your IRB.</td>
<td>n/a</td>
</tr>
<tr>
<td>Is your institution a covered entity?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Section 2: SITE-SPECIFIC LOCAL CONTEXT
This information may be helpful for a Reviewing IRB to understand when considering whether to serve as the Reviewing IRB for your organization. Additional, study-specific information will be requested when a Reviewing IRB is reviewing a specific study for your site (e.g., COI, investigator training, study-specific consent requirements, state law or institutional requirements). However, any information
provided in the IP will be superseded by information provided by the relying site HRPP on any study-specific HRP surveys (including consent form language and format).

To what state laws is your institution subject?
- FL

Age of majority in your state? 18

What circumstances affect age of consent in your state?
For example, in Pennsylvania a minor age 14 or above can consent to their own mental health treatment.

When research is conducted in Florida, individuals under the age of 18 years are <Children> with the exception of: 1. Minors 16 or older who have had the disability of nonage removed by a circuit court 2. Minors who are married or have been married (including minors whose marriage is dissolved or who is widowed) 3. Unwed pregnant minors to the extent the research is related to such minor's pregnancy 4. Minors adjudicated as an adult and in the custody or under the direct supervision of the Department of Corrections, except in regard to medical services related to abortion or sterilization 5. Unaccompanied homeless youths, within the meaning of Florida Statutes 743.067.

Do you have any state or local laws or institutional policies that require RECORD KEEPING for longer than federal law requires under the Privacy Rule or Common Rule?
- No

Do you require specific language in your consent form to describe what requires mandatory reporting to authorities?
- No

Does your site require a site-specific logo appear on consent forms and/or recruitment documents?
- No

Does your institution require approval of a waiver of authorization under HIPAA for review of medical records to identify eligible subjects?
- No

Does the site have a posted policy for the following?
NOTE: Please only select those for which there is a posted institution policy; generally accepted practice and guidance are not policy.
- Consent Process for those with Impaired Decision-Making Capacity
- Use of short forms for non-English speaking individuals

Does your IRB require HIPAA authorization forms be a separate document from the Informed Consent Form?
- No

Please enter any special formatting your IRB requires for HIPAA authorization forms?
Must include the language from HRP-507 template for studies relying upon external IRBs.

Please enter your specific consent form language regarding payment for research-related injury.
See template

Please enter your specific consent form language regarding costs to participants to participate.
See template
Please upload your template HIPAA Authorization language.

Do you have any additional HIPAA Authorization language template documents? No

**LOCAL CONTEXT: Component Sites**

As the FWA-holder of a component site, you are responsible for providing the relevant local considerations for component sites here, in the Institutional Profile, and for specific studies, as requested by the Reviewing IRB. If your component sites have information that differs from that provided in the previous section, specify the site and what differs below.

Do you have a component site on your FWA? No

**Section 3: LOCAL INSTITUTIONAL REQUIREMENTS FOR INVESTIGATORS WHEN RELYING ON ANOTHER IRB.**

These steps occur BEFORE the study is approved by the Reviewing IRB:

How should an investigator request to cede review to an external IRB? For example, should they email the IRB? Is there a specific person at the IRB? Should they just submit the request via your local IRB system (as outlined in the questions below)?

Request to rely upon an external IRB is submitted via our electronic submission system.

Do you have a reliance request packet or reliance application that needs to be completed before deciding to rely? Yes

Select all documents that must be submitted along with the reliance request package or reliance application

- Protocol
- Local consent form(s)
- Budget template
- Study contract
- Other

Please specify what other documents must be submitted

Budget and study contract must be submitted to the Office of Sponsored Programs via IRBNet. Other required documents include the Research Personnel Log, Reviews Prep forms when applicable, and other documents listed in the Submission Requirements section of the application.

These steps occur AFTER the study is approved by the Reviewing IRB: Indicate below what documentation and events are submitted to your local IRB when relying on an external IRB.

Should your investigator submit any of the following to your HRPP when ceding review to another institution? If checked, you will be asked to detail what should be

- Local amendments (personnel modifications)
- Other
What types of local amendments (e.g. personnel modifications) should be submitted to the local HRPP and what should be submitted when ceding review?

Personnel changes; amendments affecting cost, payments, and subject injury. See uploaded SOP.

What else should be submitted to your HRPP when ceding review?

Certain reportable information. See uploaded SOP.

Who at your institution should be contacted if a Lead IRB wishes to report an unanticipated problem, a determination of serious or continuing non-compliance, or a suspension or termination?

Name: Janice Turchin  
Email: FH.IRB.General@AdventHealth.com  
Phone Number: (407) 200-2677

Section 4: The Study-Specific Reliance Plan

The questions below have been harmonized with the SMART IRB Agreement Implementation Checklist and serve as your reliance preferences when serving as the IRB of record for other sites.

If you decide to serve as the Reviewing IRB in IREx, when you create the study, these preferences will appear as the basis for your SSRP. You may edit your responses for the study or for one (or more) sites, if requested, at your discretion.

Is your institution willing to serve as the IRB of Record for other institutions? If yes, more information on your reliance preferences/requirements will be collected below.

No