

Preparing a Protocol: Common Pitfalls from the Reviewer Perspective

Laura Loeb, PhD, CIP - Social and Behavioral Research Team

Therese Brown, BA, CCRC - Biomedical Research Team

with thanks to **Andrea Reyes, MSL** - Biomedical Research Team

Northwestern | RESEARCH

Objectives & Structure

■ Objectives:

- Determine the appropriate protocol template for your study
- Identify and avoid common pitfalls in preparing IRB protocols
- Locate resources to assist with protocol preparation

■ Structure: Walk through of IRB protocols

- Which Protocol do I use?
- Biomedical
- Data and Specimen Analysis
- Social Behavioral

Protocol 101

The Protocol: Your Study's Roadmap

- The protocol is the primary document the IRB uses to understand and review a research study.
- It provides a complete picture of what the research team plans to do, who will participate, and how participants' rights and welfare will be protected.
- Your study design should be clearly and thoroughly described in your protocol so reviewers can understand exactly how the research will be conducted.



OFFICE FOR RESEARCH

[CONTACT US](#)

INSTITUTIONAL REVIEW BOARD (IRB) OFFICE



[About](#) ▾

[Submitting to the IRB](#) ▾

[Resources & Guidance](#) ▾

[Education](#) ▾

[Compliance](#) ▾

[Reliance](#) ▾

\\ Institutional Review Board (IRB) Office \\\

News

[IRB Bulletin: April 2026](#) 📄

[IRB Bulletin: May 2026](#) 📄

Events

[⚡ IRB Brown Bag | ☢ Before You Submit: A](#)

Human Research Determination

Is your study human research?

- [Human Research Determination Form \(HRP-503\)](#) : (Rev. 5-01-2026) Researchers can self-determine whether their activities are human research. If you are unable to determine whether your activities meet the regulatory definition of “research” with “human subjects,” OR if you would like/need the IRB to evaluate your study to provide an official determination that your activity is not human subjects research, complete this form.
- If you need a formal determination, submit a [Human Research Determination form](#) in place of a protocol in eIRB+.
- The IRB can only make Human Research Determinations PRIOR to the beginning of research activities

Which protocol do I use?

Pay attention to
version dates
(Rev. XX-XX-XXXX)

Protocol Templates & Forms Page:

Biomedical Research Templates

- **Biomedical Protocol Template (HRP-593): (Rev. 12-01-2025)**
 - This document is intended for use primarily by those conducting biomedical research.
- **Local Protocol Addendum Template (HRP-508): (Rev. 11-01-2023)**
 - This document is intended for use when local information is not represented in the main protocol document received from a study sponsor or non-Northwestern University research collaborator.
- **Data and Specimen Analysis Protocol (HRP-1704): (Rev. 12-01-2025)**
 - This document is intended for use primarily by those involved in analysis of data and/or specimens.

Social and Behavioral Research Templates

- **Social Behavioral Protocol Template (HRP-583): (Rev. 10-01-2025)**
 - This document is intended for use primarily by those conducting social, behavioral, or educational research. If your research involves physical procedures or devices, you may need to include sections that are contained in the biomedical template protocol.
- **Social Behavioral Protocol Template Appendix B (HRP-1724) (Rev. 8-01-2025)**
- **Local Protocol Addendum Template (HRP-508): (Rev. 11-01-2023)**
 - This document is intended for use when local information is not represented in the main protocol document received from a study sponsor or non-Northwestern University research collaborator.
- **Data and Specimen Analysis Protocol (HRP-1704): (Rev. 12-01-2025)**
 - This document is intended for use primarily by those involved in analysis of data and/or specimens.

HRP-593: Biomedical Protocol

Common Areas for Clarification

Initial information

- Protocol title must be consistent with the title in eIRB+
- Confirm that the PI is eligible
- Only one PI can be listed. Other investigators can be listed as Co-investigators
- Version Date is consistent on first page and in footer
 - Do NOT update the date associated with the HRP# in the footer

The diagram shows a footer area enclosed in a black rectangular border. On the left, the text "Version Date:" is followed by a blue-outlined rectangular box, which is then followed by a blue checkmark icon, indicating that the version date should be updated in this location. On the right, the text "Page 1 of 18" is positioned above the text "HRP-593 / v12012025". The date "v12012025" is enclosed in a blue-outlined rectangular box, and a blue "no" symbol (a circle with a diagonal line) is placed to its right, indicating that the date associated with the HRP# should not be updated in the footer.

Study Summary and Federal Funding

STUDY SUMMARY:

Investigational Agent(s) (Drugs or Devices)	
IND / IDE / HDE #	
Indicate Special Population(s)	☐ Children ☐ Children who are wards of the state ☐ Adults Unable to Consent ☐ Adults with Impaired Decision-making Capacity ☐ Neonates of Uncertain Viability ☐ Pregnant Persons ☐ Prisoners (or other detained/paroled individuals) ☐ Students or Employees
Sample Size	
Funding Source	
Indicate the type of consent and HIPAA to be obtained	☐ Written ☐ Verbal/Waiver of Documentation of Informed Consent ☐ Waiver or alteration of HIPAA Authorization ☐ Waiver or Alteration of Consent Process ☐ Limited Data Set with a Data Use Agreement
Site	☐ Lead Site (For A Multiple Site Research Study) ☐ Data Coordinating Center (DCC)
Research Related Radiation Exposure	☐ Yes ☐ No
DSMB / DMC / IDMC	☐ Yes ☐ No

- Include the Federal Funding section if the study is supported by federal funds
- Federal funding information must match the information on the funding page of eIRB+

Objectives, Background, Endpoints

- Does not need to be overly technical
- Include the hypothesis to be tested

Study Intervention(s) and/or Investigational Agents(s)

- Describe **all drugs and devices** used in the research, their **purpose** of use, and their **regulatory approval status**
 - If the study has an IND (drug study) or IDE (device study), identify the holder
 - For approved drugs/devices: upload the drug insert or 510(k) to eIRB+ (if applicable)

Additional Device Considerations

- [Guidance on Use of Investigational Medical Devices in Human Subjects Research](#)
- Non-Significant Risk device (Abbreviated IDE): provide rationale for the Panel to review using criteria in [HRP-418 - CHECKLIST Non-Significant Risk Device](#)
- If AI is being used: Does it meet regulatory criteria for a medical device?
[HRP-307 WORKSHEET Devices](#)
 - Is it being used as non-device [Clinical Decision Support Software](#)?
- [Guidance for Research Involving Mobile Apps or Mobile Medical Apps](#)

Procedures Involved

- Note which assessments are Standard of Care (SOC) and which are research-related
- Upload all patient-facing materials (e.g. surveys, instructions for use) to the Supporting Documents section
- If the study involves radiation, upload the [Radiation Dosimetry Form](#) to Supporting Documents in eIRB+
 - Note: MRIs do NOT involve radiation
- Describe if any AI, machine learning, etc will be used in study assessments and/or analysis

Data and Specimen Banking

- Note if any data/specimens will be banked for future use
 - Where?
 - For how long?
 - Who will have access?
- Describe the process for releasing data or specimen

Sharing Results with Participants

- Address if **individual participant results** (e.g. diagnostic testing data, genetic testing data) and/or **study results** (e.g. published manuscripts, newsletters, presentation) will be shared
- If not sharing results, provide reasoning

Study Timelines

- Address all three of the questions noted:
 - ☐ How long a participant is involved
 - From screening to long-term follow up
 - ☐ Time to enroll all participants
 - ☐ Estimated date for completion of primary analysis

Inclusion and Exclusion Criteria

- Specify if any vulnerable populations will be included
 - Adults unable to consent
 - Individuals who are not yet adults (infants, children, teenagers)
 - Pregnant persons
 - Prisoners
- If no vulnerable populations will be included, state this
- Ensure consistency of eligibility criteria across protocol, consent and any recruitment materials

Vulnerable Populations

- Vulnerable populations include pregnant persons, persons with impaired decision-making capacity, prisoners, and children
- Include justification for enrollment
- Ensure all information in the respective checklist is included in the protocol
 - [HRP-412 - CHECKLIST Pregnant Women](#)
 - [HRP-417 - CHECKLIST Adults with Impaired Decision-making Capacity](#)
 - [HRP-416 - CHECKLIST Children](#)

Recruitment Methods

- Describe:
 - ☐ Methods that will be used to recruit participants
 - e.g. recruitment flyers, phone calls, MyChart message
 - ☐ Source of participants
 - ☐ Who will reach out to participants
 - ☐ Materials that will be used to recruit participants
- Upload all recruitment materials to the Supporting Documents section in eIRB+
 - ☐ Ensure all [required elements](#) are included

Compensation for Participation in Research Activities

- Describe amount, timing, and method of any payments
 - Insufficient: participants will receive \$20
 - Sufficient: participants will receive a \$20 gift card at the end of the study session
- Ensure consistency between consent and protocol

Withdrawal of Participants

- Describe how a participant will be withdrawn
- Note what will happen to the participant's data after withdraw
- Describe if there is the possibility of partial withdrawal with continued data collection

Risks to Participants

- If study groups are assigned to different interventions, describe if there is a difference in risk level between the study groups
- If surveys are involved, always include psychological risk
- Consistency:
 - with Investigator's Brochure (IB) or drug insert (if applicable)
 - between consent and protocol

Potential Benefits to Participants

- Focus on the participant. Do not include benefits to society or others
- Indicate if there is no direct benefit

Data Management and Confidentiality

- Provide specific details as to **how** data will be secured
 - e.g. password protection, encryption, restricted access, secure storage platforms
 - How identifiers will be managed/shared
- Explain who will have access to study data and what safeguards will be used to protect confidentiality.
- Include the data analysis plan
 - Statistical procedures, power analysis, justification for target enrollment number

Provisions to Monitor the Data to Ensure the Safety of Participants

- Describe how participant safety will be monitored throughout the study
- Note if there will be a DSMB or other monitoring committee and, if so, how often it will meet and what information it will review
 - This information is also used to ensure reports are being uploaded at proper intervals for continuing reviews
- Include any stopping rules, reporting mechanisms, or actions that would be taken if safety concerns arise

Provisions to Protect the Privacy Interests of Participants

- Privacy ≠ Confidentiality
 - **Confidentiality** concerns how information is protected after it is collected
 - **Privacy** concerns access to the participant and their personal information
- Describe how to minimize the sense of intrusiveness a participant might experience in response to questions, examinations, and procedures
 - e.g. conduct interviews in a private room, limit collection of sensitive information to what is necessary for the research

Compensation for Research-Related Injury

- This section can be deleted for Minimal Risk research
- Upload a copy of contract language, if any, relevant to compensation for research-related injury.

Economic Burden to Participants

- Describe any costs participants may be responsible for
 - e.g. time off work, child care

Consent Process

- Describe where the consent process will take place (in clinic, over the phone, etc.)
- Consent order: pre-screen patients, have consent discussion, then sign consent
- Resources:
 - [HRP-090 – SOP Informed Consent Process for Research](#)
 - [HRP-091 – SOP Written Documentation of Consent and Assent](#)
- If consent will not be obtained, state this and complete the Waiver or Alteration of Consent Process section

Non-English Speaking Participants

- If including non-English speakers:
 - Use a short form consent and submit an RNI within 10 business days
 - Short form consents may be used twice for a particular language; after the second use the full consent must be translated into the respective language
- If *not* including non-English speakers: note this **and provide brief justification**

Waiver or Alteration of Consent Process

- For vulnerable populations:
 - Closely read each of the requirements listed and address them
- When **assent** will be obtained:
 - Indicate if assent is required of all, some, or none of the participants
 - Describe the process for assent
 - Note if an assent script or document will be used
 - If an assent script or document is used, upload it to eIRB+

Waivers or Alteration of Consent Process continued

- Examples:
 - [HRP-417 - CHECKLIST Adults with Impaired Decision-making Capacity](#)
 - [HRP-411 - CHECKLIST Waiver of Written Documentation of Consent \(Verbal or Online Consent\)](#)
 - [HRP-419 - CHECKLIST Waiver Consent Process - Emergency Research](#)

- Protocol-specific justification is required for all Checklist criteria

Protected Health Information (PHI and HIPAA)

- HIPAA applies when accessing data from medical records or the Enterprise Data Warehouse (EDW) for research purposes
 - [HIPAA, PHI, & PII](#)
- List all data that will be collected that contains PHI
- State if HIPAA authorization will be obtained by some or all participants
- If requesting a HIPAA waiver, provide protocol-specific justification

Qualifications to Conduct Research and Resources Available

- Justify the feasibility of recruiting the required number of participants

Multi-Site or Collaborative Research

- What institutions or individuals are participating in the research?
- What activities will each institution or individual participate in?
- Will there be an IRB of record?
- Will identifiable information be shared among sites?
- Answering the prompts in this section are important for determining if Reliance is needed

Maintain Consistency

- Consent and protocol should have consistent information
 - Study groups
 - Enrollment numbers
 - Risks/benefits
 - Procedures
- eIRB+ and the protocol should be consistent
 - Study Title
 - PI
 - Study sites/multisite

HRP-1704: Data and Specimen Analysis Protocol

Common Areas for Clarification

Initial information

- Protocol title must be consistent with the title in eIRB+
- Confirm that the PI is eligible
- Only one PI can be listed. Other investigators can be listed as Co-investigators

Inclusion/Exclusion Criteria

- Specify age range
- State if any vulnerable populations will be included or excluded

Procedures Involved

- Retrospective data
 - Data collected **on or before** the date the study is submitted in eIRB+
- Prospective data
 - Data collected **after** the date the study is submitted in eIRB+
- Example Timeline- Submission date *June 1, 2026*
 - Retrospective arm- January 1, 2020 --> June 1, 2026
 - Prospective arm- June 2, 2026 --> December 31, 2028
- Include full dates (month/day/year) for start and end dates

Characteristics of Data/Specimen to be Used

- Separately list all data that will be collected that includes Protected Health Information (PHI)
 - Dates of treatment are PHI!
- Coded data: Identifiable information can be linked back to a participant (e.g. a study ID that is linked to a participant's MRN)
- De-identified data: No identifiable information is included
- Describe the sample size and provide rationale for that number

Data Storage

- All identifiable or restricted data must be stored on a NU- approved secure server.
 - Unapproved personal devices or cloud drives are prohibited.
- Not all data storage services meet the minimum requirements for all research data.
- All research data is subject to NU's [Research Data Policy](#) and [Data Classification Policy](#).
- [Choosing the Appropriate Data Storage](#)
 - Feinberg offers FSMResFiles – aligns with standards similar to HIPAA compliance.

Data Sharing

- **Internal Sharing** – Transfers between researchers or departments within Northwestern do not typically require a Data Use Agreement (DUA), provided the Informed Consent Form (ICF) allows it and it stays within the institution
- **External Sharing and Agreements**- Sharing data with external collaborators or receiving data from outside organizations requires a [DUA](#) or [Data Transfer Agreement \(DTA\)](#), which must be vetted and signed by the [Office for Sponsored Research](#)
- **NIH Mandates**- If you are sharing genomic data or subject to the NIH Data Management and Sharing Policy, you must obtain [Institutional certification through the IRB](#).
 - [HRP-332 Worksheet NIH GDS Certification](#)

Access, Security, and Management

- Note what will happen to the data/specimens after analysis
 - If destroyed: note when and how they will be destroyed
 - If stored long-term: note what data will be stored, where it will be stored, and for what purpose it is being stored

Risks and Benefits

- Always include breach of confidentiality as a potential risk
- Describe potential benefits to society
- Remember: Risks must be reasonable in relation to the anticipated benefits

Waivers of Consent and HIPAA authorization

- [HRP-410 - CHECKLIST Waiver or Alteration of Consent Process](#)
- [HRP-441 - CHECKLIST HIPAA - Waiver Authorization](#)
- Protocol-specific justification is required for all Checklist criteria
 - ☐ Insufficient: "There is minimal risk to the participants."
 - ☐ Sufficient: "There is minimal risk to the participants **because** this study does not impact the clinical care that participants received as it is retrospective in nature"
- Justification must be provided for both retrospective and prospective portions; greater scrutiny for prospective portions
- HIPAA applies if medical records are being accessed and/or if information from the research is being added to subjects' medical records

HRP- 583: Social Behavioral Protocol

Common Areas for Clarification

Differences between BioMed and SB Protocols

- Some sections the same, some different
- Numbered
 - 22 Sections
 - Complete sections that do not apply with 'N/A' - do not delete
- Need to use Appendix B (HRP-1724) if project includes HIPAA covered data

Common pitfalls – Sections 1-3

- Section 1.0 - Purpose and rationale of the study
 - Brief overview – generally no more than two pages is necessary
- Section 2.0 - Enrollment Criteria
 - Not specific enough, make sure all inclusion/exclusion criteria are specified here
- Section 3.0 - Sample Size
 - Not providing the total number of participants

Common pitfalls – Sections 4-6

- Section 4.0 - Recruitment and Screening Methods
 - Not providing enough detail, particularly about the experience of the potential participants
 - Using screening information as research data

- Section 5.0 - Research Locations
 - N/A

- Section 6.0 - Multi-Site or Collaborative Research
 - Not clear on plan
 - Not specific about which research activities will take place at each site
 - Not including the templated compliance language

Common pitfalls – Sections 7-8

■ Section 7.0 - International Research

- Not clear on which countries will be included
 - Note that this section needs to be completed for every country, even when data will be collected remotely
- Not researching and documenting local research review requirements
- Not addressing data protection laws (will affect research in most countries)

■ Section 8.0 - Procedures involved

- Not providing enough detail on the research procedures
 - Particularly from the perspective of the participants

Common pitfalls – Sections 9-11

- Section 9.0 - Research with Vulnerable Populations
 - Research with children (including teenagers) requires parental consent, if asking for a waiver it needs to be discussed here
- Section 10.0 - Sharing Results with Participants
 - Discussing procedures in this section that are not reflected in the rest of the study materials
- Section 11.0 - Incomplete Disclosure or Deception
 - ☐ Not providing sufficient justification
 - ☐ Not providing a debriefing

Common pitfalls – Sections 12-14

- Section 12.0 - Consent Process
 - Not providing enough detail about the experience of the participant
 - Make sure the procedures discussed here match the consent form provided
 - Not offering participants a copy of the consent information
 - Not discussing [translation procedures](#)

- Section 13.0 - Waiver of Participant Signature on Consent Form
 - Insufficient discussion of why a waiver is needed

- Section 14.0 - Waivers and Alterations of Consent Information
 - Not providing sufficient justification for the waiver
 - <https://irb.northwestern.edu/resources-guidance/checklists-worksheets/>

Common pitfalls – Sections 15-16

■ Section 15.0 - Financial Compensation

- Not enough detail about how and when payments will be made
- Some types of payment over \$100 need to be approved by NU Finance
- Not providing maximum possible compensation
- Not providing the approximate odds of winning when the compensation takes the form of a raffle

■ Section 16.0 - Audio/Video Recording/Photography

- Not discussing how recordings will be made
 - With what technology?
- Not addressing data security

Common pitfalls – Sections 17-19

- Section 17.0 - Potential Risks to Participants
 - Not discussing risk in the specific context of your participants
 - For example, loss of confidentiality
 - Under or overestimating risk
- Section 18.0 - Potential Benefits of this Research
 - Not discussing broader/scientific benefits
 - Overestimating benefits of the research
- Section 19.0 - Provisions to Protect Participant Privacy and Data Confidentiality
 - Insufficient detail on data protection
 - Not checking with [NUIT](#)

Common pitfalls – Sections 20-22

- Section 20.0 - Data Monitoring Plan to Ensure the Safety of Participants
 - [Guidance on Suicidality in Research](#)
- Section 21.0 - Long-term Data and Specimen Storage and Sharing
 - Not addressing data sharing requirements of funders/publishers
- Section 22.0 - Qualifications of Researchers to Conduct Research
 - Not describing the qualifications of all relevant study team members
 - Student research

Protocol Submission Formatting

- Upload the protocol as a word document
- For Initial submissions: Ensure that there are no old tracked-changes from previous revisions
- For Modification submissions: Only upload the tracked-changes version (no clean versions are needed for the NU protocol or Local Protocol Addendum (LPA))
- If clarifications are requested:
 - Upload any revisions with tracked-changes (red-lined version)
 - Upload revisions to the eIRB+ application (do not just put in a comment)

Contact Us

General Questions or Concerns	<u>irb@northwestern.edu</u>
Biomedical Research Questions	<u>irb@northwestern.edu</u>
Social and Behavioral Research Questions	<u>sbsirb@northwestern.edu</u>
Compliance Questions or Concerns	<u>irbcompliance@northwestern.edu</u>
Reliance Questions	<u>irbreliance@northwestern.edu</u>
Training and Education Questions	<u>irbtraining@northwestern.edu</u>
eIRB+ Technical Questions	<u>eIRB+ Support Form</u>

Thank you

eIRB+ notes

- Confirm the number of sites:
 - If both NU and NMHC are involved, it is considered multi-site.
 - If medical records are being accessed, NMHC must be a site.
 - If NU is providing funding, NU must be a site.
- Confirm that all internal team member email addresses are NU or NM affiliated