



HRP-091 | 2/2/2024 | Author: T. Bechert | Approver: I. Irizarry

## **SOP: Written Documentation of Consent**

### **1 PURPOSE**

- 1.1 This procedure establishes the process to document the informed consent process in writing.
- 1.2 The process begins when a subject agrees to take part in a research study.
- 1.3 The process ends when the consent process is documented in writing, including in an electronic format, to the extent required by this procedure.

### **2 REVISIONS FROM PREVIOUS VERSION**

- 2.1 None

### **3 POLICY**

- 3.1 In this procedure “investigator” means a principal investigator or an individual authorized by the principal investigator and approved by the IRB to obtain consent for the specific protocol, such as a co-investigator, research assistant, or coordinator.
- 3.2 In this procedure “subject/representative” means:
  - 3.2.1 The subject when the subject is an adult capable of providing consent.
  - 3.2.2 The Legally Authorized Representative (LAR) when the subject is an adult unable to give consent.
  - 3.2.3 One or both biologic or adoptive parents when the subject is a child or in the absence of a parent, a person authorized under applicable law to consent on behalf of the child to the child’s general medical care.

### **4 RESPONSIBILITIES**

- 4.1 The principal investigator is responsible to ensure these procedures are carried out.

### **5 PROCEDURE**

- 5.1 If the consent process will be documented in writing with the long form of consent documentation:
  - 5.1.1 Verify that the consent form is in language understandable to the subject/representative.
  - 5.1.2 Print the name of the following individuals on the consent document:
    - 5.1.2.1 Subject/Representative
    - 5.1.2.2 Person obtaining consent
  - 5.1.3 Have the following individuals personally sign and date (or otherwise “make their mark” on) the consent document:
    - 5.1.3.1 Subject/Representative
      - 5.1.3.1.1 If the subject/representative can only “make their mark,” document in a note to the subject’s file: the method used for communication with the prospective subject/representative, the reason for the lack of a signature and date, and the date consent was obtained<sup>1</sup>.

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<sup>1</sup> FDA’s Informed Consent Guidance for IRBs, Clinical Investigators, and Sponsors (August 2023)  
<https://www.fda.gov/media/88915/download>

5.1.3.1.2 If the subject/representative is physically unable to sign the consent form, note this on the consent form and document in a note to the subject's file: the method used for communication with the prospective subject/representative, and the specific means by which their agreement was communicated<sup>2</sup>.

5.1.3.2 Person obtaining consent

5.1.4 If the IRB required written documentation of assent, note on the signature block one of the following:

5.1.4.1 Assent of the child was obtained.

5.1.4.2 Assent of the child was not obtained because the capability of the child is so limited that the child cannot reasonably be consulted.

5.1.5 If an impartial witness was part of the consent process:

5.1.5.1 Print the name of the impartial witness on the consent document.

5.1.5.2 Have the impartial witness personally sign and date the consent document to attest that the information in the consent document and any other information provided was accurately explained to, and apparently understood by, the subject, and that consent was freely given.

5.1.6 Provided copies of the signed and dated consent document to the subject/representative. This may be accomplished either by making a photocopy or by having the above individuals sign and date two copies of the consent document.

5.2 If the consent process will be documented in writing with the short form of consent documentation:

5.2.1 Verify that the short consent form is in language understandable to the subject/representative.

5.2.2 Print the name of the following individuals on the short form consent document and the summary:

5.2.2.1 Subject/Representative

5.2.2.2 Person obtaining consent

5.2.2.3 Impartial witness

5.2.3 Have the following individuals personally sign and date the short form consent document and/or the summary:

5.2.3.1 Subject/Representative sign short form consent document

5.2.3.2 Person obtaining consent sign summary

5.2.3.3 Impartial witness sign both short form consent document and summary

5.2.4 If the IRB required written documentation of assent, note on the signature block on the short consent document one of the following:

5.2.4.1 Assent of the child was obtained.

5.2.4.2 Assent of the child was not obtained because the capability of the child is so limited that the child cannot reasonably be consulted.

5.2.5 Provide a copy of the signed and dated short consent document and a copy of the signed and dated summary to the subject/representative. This may be accomplished either by making photocopies or by having the above individuals sign and date two copies of the short consent document and summary.

5.3 If the requirement for written documentation of the consent process has been waived by the IRB and the IRB determined that the subject/representative had to be offered the opportunity to document his

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<sup>2</sup> FDA's Informed Consent Guidance for IRBs, Clinical Investigators, and Sponsors (August 2023)  
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or her consent in writing, offer the subject/representative the option to document his or her consent in writing.

5.3.1 If the subject/representative declines, take no further action.

5.3.2 If the subject/representative accepts, follow the process to document consent in writing with the long or short form of consent documentation.

5.4 Place the signed and dated documents in the subject's binder.

## **6 MATERIALS**

6.1 If the consent process will be documented in writing with the long form of consent documentation:

6.1.1 Consent document

6.2 If the consent process will be documented in writing with the short form of consent documentation:

6.2.1 Short consent document

6.2.2 Summary (same content as the long form of consent documentation).

## **7 REFERENCES**

7.1 21 CFR §50.27

7.2 45 CFR §46.117

7.3 <https://www.fda.gov/media/88915/download>

7.4 AAHRPP element I-9