	<mark>e</mark> -Protocol		PROTOCOL Biomedical Research Saint Louis University	Protocol # 22080 Parikh			
	Protocol	Title:	The accuracy of I-Scan mode of imaging versus white light imaging as compared to CD31, CD34, CD61 stains (Standard of care) in differentiating Gastric Antral Vascular Ectasia (GAVE) from portal hypertensive gastropathy (PHT Gastropathy). APPROVED 07/14/2014				
	Protocol	Status:					
	Date Sul						
	Approval	Period:	07/14/2014-07/16/2015				
Important Note:		t Note:	This Print View may not reflect all comments and contingencies for approval. Please check the comments section of the online protocol. Questions that appear to not have been answered may not have been required for this submission. Please see the system application for more details.				
			* * * Continuing Review * * *				
Continuing	Review R	equest					
WHAT TO	UPLOAD	WITH YOUR (CONTINUING REVIEW APPLICATION				
		For studies where research activities are limited to data analysis, upload subject safety information and publications (e.g., manuscripts, abstracts) since the last IRB approval, if applicable.					
		can no longe list kept), the	ctivities are limited to data analysis of de-identified/anonymous data (data that er be linked to subject identifiers directly or through use of a code with master e study can likely be closed via the Final Report Form. See the SLU IRB or Closure of Human Subjects Research Studies.				
	• Subje (SAE)		studies, upload:				
			ct safety information including the most current cumulative table and data safety monitoring rep val, if applicable.	Serious Adverse Event ports since the last IRB			
		Any p	ublications (e.g., manuscripts, abstracts) since t	he last IRB approval.			
		Any changes 24 of this for	s, updated and/or new study materials should be m should be completed.	• uploaded and questions 19 -			
1.	Please inc	licate the stat	us of the study:				
	a)	-	as not started but will become active. xplain why the study has not started.				
	b) X	Study is Study is	ACTIVE (please check the appropriate box belo s open to accrual. s on hold or halted. explain what needs to occur before accrual can				
	х		s permanently closed to accrual.				

C-PROTOCOL		PROTOCOL Biomedical Research Saint Louis University			Protocol # 2208 Paril
Protocol Title:		CD3	31, CD	racy of I-Scan mode of imaging versus whit 034, CD61 stains (Standard of care) in diffe GAVE) from portal hypertensive gastropathy	rentiating Gastric Antral Vascular
		i.	Y	Have all subjects completed all research activities/interventions?	related
		ii.	Ν	Will the research only remain active for lo subjects?	ong-term follow-up of
		iii.	Y	Are remaining research activities limited instructions above).	to data analysis only? (See
		iv.	Ν	For studies that are closed to subject acc to be re-consented (to inform them about procedures, study risks, study personnel a clean copy of consent/addendum cons	t changes to study , etc.)? If yes, please submit
		For	IRB o	office use: * may qualify for expedited review	v
	,		•	pired and needs to be re-initiated. research activities occurring during lapse in	IRB approval.
2.	Date the study wa	is initia	ally ap	proved by the IRB:	07/17/2012
3.	Approval date of previous continuing review:				07/08/2013
4.	Total number of participants/records/specimens approved to date.				150
5.	Total number of subjects that have given consent (verbal or written) to date.				25
6.	Total number of s N/A).	ubject	N/A		
7.	Total number of p	articip	25		
8.	For multi-center studies, number of subjects approved for accrual study- wide (SLU site plus all other sites).				N/A
9.		For multi-center studies, number of subjects enrolled study-wide (SLU site plus other sites).			N/A
		awale	from	the research (since last approval date) and	explanation/reasons for
10.	withdrawals.	awais			

PROTOCOL Biomedical Research Saint Louis University

The accuracy of I-Scan mode of imaging versus white light imaging as compared to CD31, CD34, CD61 stains (Standard of care) in differentiating Gastric Antral Vascular Ectasia (GAVE) from portal hypertensive gastropathy (PHT Gastropathy). **Protocol Title:** _____ 11. Description and number of: a) Reportable Protocol Deviations/Violations since the last approval date: N/A Unanticipated Problems (UPs) since the last approval date: b) N/A Serious Adverse Events (SAEs) since the last approval date: C) N/A 12. Have there been any complaints about the research during the last year? Ν If yes, please describe. 13. Briefly describe the progress of the study to date. Patient recruitment completed. Now analyzing data. Is there a Data Safety Monitoring (DSM) plan for this study? 14. Y No Yes, a copy of the DSM report(s) for the last approval period is attached. Yes, but a copy of the DSM reports(s) for the last approval period is not attached. Please explain below. 15. **FDA Regulated Studies** Is this a Food and Drug Administration (FDA) Regulated Study, (i.e., involves drugs, Y devices, biologics)? If yes, please answer the following questions: a) Have there been any changes in the FDA status of any Ν drug or device used in the study? If yes, please explain: b) Have any of the investigational drugs or devices used in Ν this study received FDA approval?

e-Protocol PROTOCOL Protocol # 22080 Parikh **Biomedical Research** Saint Louis University **Protocol Title:** The accuracy of I-Scan mode of imaging versus white light imaging as compared to CD31, CD34, CD61 stains (Standard of care) in differentiating Gastric Antral Vascular Ectasia (GAVE) from portal hypertensive gastropathy (PHT Gastropathy). _____ If yes, please explain: C) Have any new alternative drugs or devices been approved N for treatment of the study condition that may affect subjects willingness to participate? If yes, please explain: Have current subjects been notified? Please explain: d) Has there been a change in the standard care that may be N considered as an alternative to the investigational drug or device or that would affect the original study design? If yes, please explain: Have current subjects been notified? Please explain: Ν e) Is there any new information that might affect the risk/benefit ratio and the willingness of current study subjects to participate or to continue to participate in the research? If yes, please explain: Have current subjects been notified? Please explain: f) Does the study include an investigator's brochure (IB)? Ν If yes, what is the current version date? (If study has multiple IBs, attach current versions in Attachments section (#16)) 16. Provide a summary of any recent findings, literature, or other relevant information (especially pertaining to risks), if applicable. Nothing to report at this time.

<mark>e</mark> -Pro	TOCOL	PROTOCOL Biomedical Research Saint Louis University	Protocol # 22080 Parikh
Protocol Ti	С	he accuracy of I-Scan mode of imaging ver D31, CD34, CD61 stains (Standard of care ctasia (GAVE) from portal hypertensive ga	e) in differentiating Gastric Antral Vascular
17.	protocol during the include changes in resulted in a change	y significant amendments or revisions to th past approval period? (Significant amendm study design or risk level including those th e in consent). y summarize the changes:	nents
18. Y	assent do the versio consent fo participan	ent materials attached to this eIRB applicat cuments, recruitment statements or other r ns being used in the conduct of this study a rms on file, if required. (If the requirement is have enrolled since last continuing revie	naterials used to obtain consent) are and all enrolled subjects have signed to obtain consent was waived or if no w, check N/A).
	NOTE: TI redacted p	ne IRB routinely monitors consent docume participant consent forms.	nt usage and may request copies of
19.	Are any changes (a	mendments) requested with this Continuin	ng Review?
		se complete the remainder of this form. s complete. Please submit.	
20.	what the change in	posed changes to the protocol in lay terms volves. * If this is a change in PI a new De ed document in the Attachments section.	, including the type of change AND epartment Chair review is required.
	Change PI to Hars	h Parikh, M.D.	
21.		/explanation for the proposed changes. eted the fellowship program.	
22.	If no, please justify	ed subjects need to be notified of changes' why not. ompleted the study.	? N
		in how AND when notification or re-conser	nting will occur.
23.	Does the SLU IRB	Protocol need to be modified?	Υ
24.	Are consent docum	ents modified?	Ν

Proceed to the appropriate section(s) of the protocol and make your changes. Also make necessary changes in

C-PROTOCOL

PROTOCOL Biomedical Research Saint Louis University

Protocol Title:

The accuracy of I-Scan mode of imaging versus white light imaging as compared to CD31, CD34, CD61 stains (Standard of care) in differentiating Gastric Antral Vascular Ectasia (GAVE) from portal hypertensive gastropathy (PHT Gastropathy).

the Consent Form(s), Assent Form(s), Recruitment Statement, Questionnaire, or other attachments, as applicable. Upload any revised IRB materials. Please provide the entire revised document (not just revised pages). Use track changes or highlight (in yellow) changes to documents being revised. Please upload a tracked/highlighted copy of each revised document to be stamped upon IRB approval. NOTE: Upload a clean copy (changes or highlights removed) of documents in file formats other than Microsoft Word (i.e., the IRB will remove the tracked changes/highlights on uploaded Word documents).

NOTE: Protocol amendments must receive IRB review and approval before they are implemented, unless an immediate change is necessary to eliminate an apparent hazard to the subjects.

Sponsored Studies: Remember to update the Sponsor's Protocol version number and date in the Funding section of the protocol (this information will appear on the approval letter).

List of changed sections:	
Personnel Information	
Subject Population 8(a-g)	
Subject Population 8(h-k)	
Risks (9)	
Attachments (16)	