IMPAACT Manual of Procedures
Overview of Section Contents and Identification of Current Section Versions

Section	Current Version	Comments
Section 1 Overview of IMPAACT Network	4.0, 20JAN2023	• Updated language throughout to align with NIH Language Guide and included reference to the Guide • Updated mission statement to align with overall Network priorities • Updated Network Leadership organizational structure figure • Specified that each organization within the Network must adhere to institutional policies and guidelines on issue escalation and quality management • Added Network MOP sign-off requirements • Reviewed and updated links throughout
Section 2 Network Groups	4.0, 20JAN2023	• Revised concurrence requirements for SLG and MOG decisions and noted that the chair and vice chair(s) may determine next steps if decisions are mixed or split • Revised voting membership to include *ex officio* members • Clarified site laboratory support between the Laboratory Center (LC) and Westat and added that the LC is responsible for coordination of the Pharmacometrics Service Core
Section 3 Good Documentation Practices	4.0, 20JAN2023	• Made minor updates to the ALCOA+ definitions • Added new section on Trial Master Files • Reviewed and updated acronyms and links throughout
Section 4 IMPAACT Protocol Teams	4.0, 20JAN2023	• Updated list of protocol team responsibilities throughout the life cycle of the study • Added development of the Analysis Implementation Plan (as relevant) to list of statistician responsibilities • Added study-specific pharmacy training to DAIDS protocol pharmacist responsibilities • Added monitoring study data and issuing site queries, as needed, to protocol data manager responsibilities and monitoring laboratory data and issuing lab queries to laboratory data manager responsibilities • Reviewed and updated acronyms and links throughout
Section 5 Community Partnership	4.0, 20JAN2023	• Minor formatting revisions • Reviewed and updated acronyms throughout
Section 6 Network Meetings and Communications	4.0, 20JAN2023	• Emphasized the use web-based platforms as the preferred approach for virtual meetings • Added review from relevant protocol team for press releases and materials that are developed within the Network

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Section 7 General Policies and Procedures	4.0, 20JAN2023	• Clarified language on financial disclosures, per the DAIDS policy on Collection of Financial Disclosures • Added responsibility for the Operations Center to send the ClinicalTrials.gov checklist to DAIDS and their regulatory contractor after Version 1.0, for IND studies • Updated language for ClinicalTrials.gov definitions of primary completion date
Section 8 Human Subjects Considerations	4.0, 20JAN2023	• Updated requirements for HSP/GCP training as per the DAIDS SCORE Manual • Added reference to single IRBs • Clarified that the age of assent will be determined by IRB/EC policy and local guidelines; and added reminders to reconsenting when a participant reaches age of assent or consent
Section 9 Protocol Development and Modifications	4.0, 20JAN2023	• Added clarifying steps for scientific committees for revising/resubmitting or approving protocol concepts • Added use of Representative Studies Rubric tool and NIAID language guide, to guide and monitor for representation in protocols • Added role of SLG to evaluate proposed protocol chair and vice chair for a given protocol • Clarified requirements for team sign off when modifications are made to study objectives, design, or other significant changes • Updated expected timelines for protocol development • Added language for team review/sign off requirements prior to MPRG review, as well as procedures for additional MPRG reviews • Clarified communications of scientific review committee outcomes • Added steps for review of draft protocol with sIRB is required • Clarified signoff requirements for amendments, letter of amendments, and urgent safety notifications • Added instructions for sites once an amendment is approved
Section 10 Site Selection for IMPAACT Studies	4.0, 20JAN2023	• Clarified that a one-step site selection process is utilized for most studies • Added expectations for timing of site selection and process/considerations for inviting sites to submit applications • Added details for site selection plan that is provided to the MOG for review

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Section 11 Study Specific Pre-Implementation Activities	4.0, 20JAN2023	• Added information on confidentiality disclosure agreements • Clarified roles of LC and LT to coordinate laboratory processing chart (LPC) review and distribution • Clarified review, sign-off, and timing of SPDSMP, PK DMP, and SAPs • Added that studies with pharmaceutical funding support may require a study-specific funding agreement with the pharmaceutical company to be finalized prior to opening a study to accrual • Added sign-off requirements if significant updates are made to the study-specific checklist after finalization • Added process details for clinical trials insurance • Added reference of material transfer agreements being included in overall study-specific activation checklist • Added details on site specific translations, and role of NICHD coordinating center for translation of protocols into Portuguese for sites in Brazil
Section 12 Study Implementation	4.0, 20JAN2023	• Clarified that enrollment in IMPAACT studies is competitive across sites, unless otherwise specified • Added reference to dashboard on DMC portal for accrual and retention information • Clarified that the DMC notifies DAIDS of a change of status to "enrolling" and "closed to accrual" • Clarified DMC-provided materials, including the print matrix of eCRFs • Added that CRMs may use their discretion when documenting calls with large numbers of site representatives • Clarified that studies with collaborating pharmaceutical companies may include pharmaceutical representatives on the CMC; however, they will be limited to an advisory role only Updated categories of protocol deviations, reporting process/timelines, and notification requirements to DAIDS
Section 13 Study Oversight	4.0, 20JAN2023	• Added details on remote clinical site monitoring • Added role of medical officers in SMC review • Clarified process for initial and routine SMC reviews • Added new section (13.7): IMPAACT Network Issue Escalation
Section 14 Study Close-out	4.0, 20JAN2023	• Added requirement to include DAIDS monitoring operations branch representatives to team calls to plan for study closure • Added sIRB communications for study close out • Added that NICHD sites should contact Westat for guidance on protocol deregistration if needed • Added review of financial disclosure forms as a component of close-out

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Section 15 Ancillary Studies and Investigations	4.0, 20JAN2023	• Clarified role of proposing ancillary study investigator to communicate with relevant study sties to confirm IRB and MTA requirements for specimen shipment • Updated email lists for ancillary study notifications • Clarified the types of projects that require a specimen and data usage agreement (SDUA)
Section 16 Training	4.0, 20JAN2023	• Added Department of Transportation (DOT) Training for transport of specimens, as applicable to US sites • Added option of protocol teams providing participant logs from online trainings for training documentation; and clarified that virtual attendees must document attendance in on-site training files • Corrected timing for development of training plans around time of protocol finalization • Referred to the DAIDS SCORE Manual for training requirements and documentation templates
Section 17 Laboratory Considerations	4.0, 20JAN2023	• Emphasized that that Network Laboratory Center (NLC) consists of the IMPAACT Laboratory Center (ILC) and Westat; separated requirements for each group for clarity • Added references to the MiPAL system for IMPAACT LC • Clarified processes for specimen archive and destruction decisions • Clarified that shipping institution and receiving labs are ultimately responsible for MTAs
Section 18 Network Evaluation	4.0, 20JAN2023	• Clarified that project accrual numbers are based on site-provided goals as indicated in the MOG-approved site selection and accrual plan • Added PBMC storage shipping compliance for lab data criteria
Section 19 Publications Requirements and Procedures	4.0, 20JAN2023	• Corrected analysis and publication review dates for consistency within section • Updated final data entry section to account for study-specific timelines; communicated by the DMC • Separated tables for primary analysis planning and publication writing • Updated language throughout section to account for abstracts and manuscripts • Replaced reference to “writing team chairs” with “lead authors” • Clarified requirement for co-author and protocol team review of publications prior to submission to the IMPAACT Publications Review Group
Appendix I Unblinding Procedures	4.0, 20JAN2023	• Clarified that full unblinding occurs after the final clinical database lock has occurred • Added reference to DAIDS Emergency Unblinding Policy