

WORKSHEET: Emergency Use - Devices

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This worksheet is used to determine whether emergency use of a device meets FDA guidance.

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All criteria in 1 must be met

1. Criteria for <Emergency Use> of a device *FDA Guidance: IDE Early/Expanded Access (see Footnote 1)*

1.1	<input type="checkbox"/>	The treating physician [will document/has documented] in the medical record:
	1.1.1	<input type="checkbox"/> The patient has a life-threatening or severely debilitating condition (see Footnote 2)
	1.1.2	<input type="checkbox"/> The condition needs immediate treatment, diagnosis, or monitoring
	1.1.3	<input type="checkbox"/> No generally acceptable alternative for the condition exists
	1.1.4	<input type="checkbox"/> The treating physician has assessed the potential for benefits from the unapproved use
	1.1.5	<input type="checkbox"/> The treating physician has substantial reason to believe that benefits will exist
	1.1.6	<input type="checkbox"/> There is no time to use existing procedures to get FDA approval for the use
1.2	<input type="checkbox"/>	One of the following is true: <input type="radio"/> There [is/was] no IDE <input type="radio"/> The treating physician [wants/wanted] to use the device in a way not approved under an existing IDE <input type="radio"/> The treating physician [is/was] not part of an IDE study
1.3	<input type="checkbox"/>	The treating physician [will follow/has followed] as many of the patient protection procedures listed below as possible: (check all that apply)
	1.3.1	<input type="checkbox"/> Clearance from the institution as specified by their policies
	1.3.2	<input type="checkbox"/> Concurrence of an IRB chair
	1.3.3	<input type="checkbox"/> If an IDE exists for the device, authorization from the sponsor
	1.3.4	<input type="checkbox"/> Informed consent from the patient or a legal representative (see Footnote 3)
1.4	<input type="checkbox"/>	One of the following is true: <input type="radio"/> An uninvolved physician [will assess/has assessed] prospectively that the criteria in Section 1.1 are met <input type="radio"/> An uninvolved physician [will assess/has assessed] retrospectively that the criteria in Section 1.1 were met
1.5	<input type="checkbox"/>	The emergency use with documentation of the above findings [will be/was] reported to the IRB within 5 working days after the use
1.6	<input type="checkbox"/>	The use is not <Human Research as Defined by HHS>

2. Notes

3. Footnotes

3.1	Emergency use of an unapproved device is not <Human Research as Defined by FDA>. See FDA Presentation: Institutional Review Board: Compassionate and Emergency Use.
3.2	<i>Life-threatening</i> means diseases or conditions where the likelihood of death is high unless the course of the disease is interrupted and diseases or conditions with potentially fatal outcomes, where the end point of clinical trial analysis is survival. The criteria for life-threatening do not require the condition to be immediately life-threatening or to immediately result in death. Rather, the patients must be in a life-threatening situation requiring intervention before review at a convened meeting of the IRB is feasible. <i>Severely debilitating</i> means diseases or conditions that cause major irreversible morbidity. Examples of severely debilitating conditions include blindness, loss of arm, leg, hand or foot, loss of hearing, paralysis or stroke.
3.3	Consent does not have to follow the informed consent requirements at 21 CFR §50.25. The IRB does not require written documentation of informed consent for compassionate use of devices.
3.4	FDA contact for emergency uses of devices: Office of Crisis Management & Emergency Operations Center (866) 300-4374 (301) 796-8240