IMPAACT Manual of Procedures, Version 5.0, dated 31 May 2024
Overview of Section Contents and Summary of Changes

Section	Summary of Changes
Section 1 Overview of the IMPAACT Network	• Updated mission and moved to Section 1.1 • Clarified and updated IMPAACT scientific agenda and related research areas and priorities throughout Section 1.2 • Updated Figure 1-1 to remove the external scientific advisory group and clarified SLG at-large members • Updated sign-off requirements for the Network MOP to also include the SDMC and LC principal investigators and Operations Center Director in Section 1.4 • Updated Figure 1-2 • Added that Pharmacy Establishment Plans for NICHD-supported sites are managed through Westat in Section 1.5.1.3
Section 2 Network Groups	• Revised research area Scientific Committee names • Clarified clinical data safety monitoring responsibilities for DMC in Table 2-2 • Clarified technical assistance responsibilities for LC and Westat in Table 2-3
Section 3 Good Documentation Practice	• No changes; section version updated
Section 4 Protocol Teams	• Clarified that the protocol pharmacologist role may also be filled by a protocol pharmacometrician, and protocol statistician role may be filled by a protocol epidemiologist • Updated terminology for LDMS templates in Table 4-1 • Revised primary responsibility for LPC development from LT to LC representative in Table 4-1
Section 5 Community Participation and Engagement in the IMPAACT Network	• Added responsibilities for Community Engagement Program staff in Section 5 • Updated ICAB goals, roles and responsibilities, and participation requirements in Section 5.2 and its subsections • Updated ILG membership requirements, process for membership selection, roles and responsibilities, and SC representation in Section 5.3 and its subsections • Revised, clarified, and streamlined community input throughout the study lifecycle in Section 5.5 and its subsections
Section 6 Network Meetings and Communications	• Clarified conference call documentation in Section 6.1.3
Section 7 IMPAACT General Policies and Procedures: Funding, Conflict of Interest, Certificate of Confidentiality, and ClinicalTrials.gov	• Clarified timing for completion of the DAIDS ClinicalTrials.gov Protocol Checklist in Section 7.4.1 • Clarified sites to be included in Table 7-1 • Updated processes for requesting Letters of Support in Section 7.5
Section 8 Human Subjects Considerations	• No changes; section version updated

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Section 9 Protocol Development and Modifications	• Added cross-reference for SC voting members in Section 9.1.2 • Updated email alias for SDAC representatives in Section 9.1.3 • Clarified when sign-off is required, updated protocol section development prioritization, and added instructions for team members to inform CRMs when internal reviews are scheduled in Section 9.2.1 • Corrected expected timelines for protocol development in Table 9-1 • Clarified review members and conference call process for MPRG reviews in Section 9.2.4 • Added submission of completed RSR as part of CSRC review and clarified timelines in Section 9.2.5 • Clarified leadership review process for amendments in Section 9.3 • Added reference to new study enrollment systems, Stars, in Sections 9.3.2 and 9.3.3 • Revised general guidance for collaborative studies in Section 9.4
Section 10 Site Selection for IMPAACT Studies	• Clarified process for engaging sites beyond those affiliated with IMPAACT in Section 10.3
Section 11 Study-Specific Pre-Implementation Activities: Open to Accrual and Site-Specific Study Activation	• Revised primary author and required approvers for the Laboratory Processing Chart in newly added subsection 11.1.5.1 and in Table 11-1; clarified development and review process • Added subsection 11.1.5.2 to include processes related to specialty or focus laboratory readiness • Added reference to new study enrollment systems, Stars, in Sections 11.1.6, 11.2, and 11.2.7 • Updated versioning requirements for study-specific MOPs in Section 11.1.8 • Aligned SPDSMP finalization with DAIDS process requirements in Section 11.1.9 • Clarified requirements for primary SAPs in Section 11.1.10 • Added potential approvals of contracts/agreements in Section 11.1.11 • Added availability of ancillary supplies as part of pharmacy requirements in Section 11.2.6 • Added data management requirements in Section 11.2.7 • Clarified responsibilities for lab-related activation requirements in Section 11.2.8 • Added expectations for site-specific SOPs in Section 11.2.10 and added subsection for the age and identify verification SOP in Section 11.2.10.2

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Section 12 Study Implementation	• Updated roles/responsibilities related to study status change notifications (e.g., enrolling and closed to accrual) in Sections 12.1.2 and 12.2.4 • Added reference to Medidata Rave in Section 12.3.2 and clarified process for requests for eligibility corrections in Section 12.3.2.1 • In Table 12-1, created separate rows for all site email messages and Memoranda of Operational Instruction to clarify team sign-off requirements; shifted team sign-off requirements for SMC/DSMC to Section 13 • Revised standard Clinical Management Committee membership in Section 12.4.2 and clarified that designated clinicians on the CMC are responsible for responding to CMC queries
Section 13 Study Oversight	• Updated clinical site monitoring in Section 13.2 to align with similar text in new protocols • Clarified SMC chair and Operations Center representative roles in SMC summary review reports, added rows for Protocol and Laboratory Data Managers, and updated timelines for review of draft data reports in Table 13-1 • Clarified processes for closed review sessions in Section 13.5.2.2 • Clarified that draft documents, rather than near final drafts, are provided for initial SMC review and added processes related to team responses for initial reviews in Section 13.5.3.1 • Added guidance and process for team sign-off requirements in Section 13.5.3.2 and new Section 13.5.5 (with cross-reference in Section 13.8.2) • Clarified difference in processes for event-driven and interim analysis reviews compared to triggered or emergent safety reviews in Section 13.5.3.2
Section 14 Site Study-Specific Close-out	• Updated roles/responsibilities related to study status change notifications in Section 14.2 and in Table 14-2 • Clarified that the format and transmission method for sending test results to the DMC should follow the Data Transfer Agreement (DTA) in Section 14.3.5
Section 15 Ancillary Studies, Investigations, and Access to Study Data	• Clarified that information on available biological specimens can be accessed on the Specimen Repository website for approved studies in Section 15.1 • Added guidance around review of site-specific ICFs for NWCSs in Section 15.2 • Removed reference to required MOG/SLG review of ancillary proposals and noted proposal coordinator communicates with proposing investigators in Section 15.2.3 • Clarified communications around approvals or disapprovals and processes if MOG/SLG review is indicated in Section 15.2.4 • Clarified conditions under which an SDUA may not be required in Section 15.4.2 • Clarified responsibilities and procedures for NWCSs in Section 15.5

Section	Summary of Changes
Section 16 Training for Site Key Personnel and Other Site and Laboratory Staff	• Added reference to DMC Introductory Training and eLearnings in Table 16-1 • Clarified processes and guidance for LDMS training in Section 16.2.1
Section 17 Laboratory Considerations	• Removed reference to regionally qualified laboratories • Clarified IMPAACT Laboratory Center responsibilities • Added additional and clarified current lab activation requirements to align with current lab activation template • Added that all clinical lab personnel involved in specimen processing/testing must take GCLP training • Clarified review of Action Plans and that critical findings to be reviewed by DCLOT • Clarified process and documents reviewed by DCLOT through activation approval process • Added reference to cross-network PBMC processes • Added considerations for specimen shipping and clarified QC process for specimen labels • Updated process for reviewing studies and specimens to be added to repository website • Clarified MTAs/STAs development and review process
Section 18 Network Evaluation	• Updated timing for external Network reviews to approximately mid-funding cycle, or as needed • Added Westat as a source for outstanding laboratory critical action items and revised the standard for protocol deviations to indicate they are informational only in Table 18-1 • Removed NEG as entity providing Network productivity numbers in Section 18.3 • Clarified response requirements for sites in Section 18.4
Section 19 Data Analysis and Publications Procedures	• Clarified that publications timelines may be adjusted to account for regulatory submissions, if applicable, in Sections 19.3.1 and 19.3.3 • Added that study monitoring must be complete prior to database lock in Section 19.3.5 • Clarified processes for internal organizational reviews of publications in Section 19.6 • Clarified that co-authors must review draft conference presentation materials and updated templates link in Section 19.8 • Updated guidelines for authorship consistent with minor changes made in the ICMJE criteria, updated January 2024, in Section 19.9.1 • Clarified lead author responsibilities in co-author determination in Section 19.9.2 • Clarified that community or external stakeholder materials may be posted publicly in Section 19.12.2
Appendix I Unblinding Procedures	• No changes; section version updated