## **CTO STREAM APPLICATION SIGNATURE REQUIREMENTS**

## Appendix 2: Signature Requirements for the CTO Stream REB Submissions

**Exception**: The Board of Record reserves the right to request the Principal Investigator signature at any time (i.e., if the re-submission or subsequent correspondence involves significant revisions related to safety information).

**Note:** Delegated signatories must be listed on the study delegation log prior to assuming this responsibility. A copy of the delegation log could be requested at the discretion of the Board of Record.

Type of Application	Required Signatures
Provincial Initial Application (PIA)	
First time Provincial Initial Application is submitted	Provincial Applicant
	Co- Investigator (if included in the application)
Subsequent correspondence to Provincial Initial Application	Provincial Applicant or Delegate
(i.e., in response to requests for modifications from the REB)	
Provincial Post Approval Application	
<ul> <li>First time provincial post approval form is submitted</li> <li>For example: <ul> <li>Provincial Amendment (PAM)</li> <li>Provincial Reportable Event (PRE)</li> <li>Provincial Continuing Review (PCR)</li> <li>Provincial Study Closure (PSC)</li> </ul> </li> </ul>	Provincial Applicant
<ul> <li>Provincial Amendment involving only a change to:</li> <li>Contact details for PA/Co-Applicant</li> <li>Name/contact details of main contact</li> </ul>	Provincial Applicant or Delegate
Subsequent correspondence to any post approval form (i.e., in response to requests for modification from the REB)	Provincial Applicant or Delegate
Centre Initial Application (CIA)	
First time Centre Initial Application is submitted	Principal Investigator
	Co- Investigator (if included in the application)

## **CTO STREAM APPLICATION SIGNATURE REQUIREMENTS**

	<ul> <li>For TOH/OHRI studies: Department Head / Department Approver         <ul> <li>Exceptions:</li> <li>Division Head for studies from Department of Medicine and Department of Surgery</li> <li>Dr. Bill Cameron if Department Head is in conflict with the application</li> <li>Department Approver for Clinical Epidemiology Program</li> </ul> </li> <li>For UOHI/OHIRC studies: Division Head/Division Approver         <ul> <li>Exceptions:</li> <li>Dr. Peter Liu if Division Head is in conflict with the application</li> <li>Dr. Thierry Mesana if Dr. Liu is</li> </ul> </li> </ul>
	<ul> <li>Dr. Thierry Mesana if Dr. Liu is also in conflict with the application</li> <li>Primary Representative</li> </ul>
Subsequent correspondence to Provincial Initial Application (i.e., in response to requests for modifications from the REB)	Principal Investigator or Delegate
Centre Post Approval Application	
<ul> <li>First time centre post approval form is submitted</li> <li>For example: <ul> <li>Centre Amendment (CAM)</li> <li>Centre Reportable Event (CRE)</li> <li>Centre Continuing Review (CCR)</li> <li>Centre Study Closure (CSC)</li> </ul> </li> </ul>	Principal Investigator
Centre Amendment to change Principal Investigator (PI): (e.g., the current PI is being replaced with a new PI)	<ul> <li>Principal Investigator (new)</li> <li>For TOH/OHRI studies: Department Head / Department Approver         <ul> <li>Exceptions:                 <ul> <li>Division Head for studies from Department of Medicine</li> <li>Dr. Bill Cameron if Department Head is in conflict with the application</li> </ul> </li> </ul> </li> </ul>

## **CTO STREAM APPLICATION SIGNATURE REQUIREMENTS**

	<ul> <li>Department Approver for Clinical Epidemiology Program</li> </ul>
	<ul> <li>For UOHI/OHIRC studies: Division Head/Division Approver</li> <li>Exceptions:         <ul> <li>Dr. Peter Liu if Division Head is in conflict with the application</li> <li>Dr. Thierry Mesana if Dr. Liu is also in conflict with the application</li> </ul> </li> </ul>
	Primary Representative
Centre Amendment to change Co-Investigator (Co-I): (e.g., addition of a new Co-I or replacement of the current Co-I with a new Co-I)	Principal Investigator Co-Investigator (new)
<ul> <li>Centre Amendment involving only a change to:</li> <li>Contact details for PA/Co-Applicant</li> <li>Name/contact details of main contact</li> </ul>	Principal Investigator or Delegate
Subsequent correspondence to any post approval form (i.e., in response to requests for modification from the REB)	Principal Investigator or Delegate
Exceptions to the signat	ure process:

The Board of Record reserves the right to request the Principal Investigator signature at any time.

Revision History		
Effective Date	Summary of Changes	
September 27, 2022	Updated instruction for TOH/OHRI Department Head sign off for clarity; added instruction for UOHI/OHIRC Division Head sign off added pagination	
January 12, 2022	Updated instruction for TOH/OHRI Department Head sign off (replaced "supervisor" with "Dr. Bill Cameron"); updated Amendment descriptions for clarity	
October 2, 2019	Initial Version	
	September 27, 2022 January 12, 2022	