March 2015  
(updated from September 2010)

Department of Psychology Internal IRB Committee Audit Checklist

1. Protocol Documentation folder (all documentation can be in digital format, if backed up on the departmental server)
   a. IRB application for the study present, w/original signatures
   b. Records of all IRB correspondence; continuing reviews
   c. IRB-approved consent forms available for review
   d. All records kept for as long as IRB stipulates

2. Consent form documentation
   a. Are consent forms accounted for?
   b. Are consent forms printed on department letterhead? (This is stated as a university preference for faculty and staff research on the IRB website.)
   c. Adherence to IRB preferences for consent form organization
   d. Adherence to department preferences for consent form organization
      i. Printed line for subject signature and subject’s printed name
      ii. Printed line for researcher signature and researcher’s printed name (though the Experimenter Signature Log can be used in place of this)
      iii. Copy of consent form given to subjects (for the vast majority of protocols, this is required by the IRB)
   e. Master Enrollment Log or similar log (e.g., REP log, cash reimbursement log)
   f. Experimenter Signature Log (i.e., a list of all persons who obtain informed consent on the protocol, including the experimenter’s printed name, signature, and the type(s) and date(s) of the research ethics training they completed)
   g. Does number of consent forms match Master Enrollment Log?
   h. Randomly selected consent forms reviewed for specific details

3. Human Subjects Training Certifications
   a. Have faculty, staff, and student members of the study completed training?
   b. Is it documented within the lab?

4. Other Issues