

This form should be used when it is unclear whether the proposed activities require review by an Institutional Review Board (IRB). If the proposed study clearly is Human Research, do not complete this form! Instead, please submit the appropriate application for review and approval by the IRB.

Title (If funded, provide exact title of funded project)					
Effects of Stress, Sleep Hy					its
Contact Information				Te ===:	
Principal Investigator Nam	ne Audrey Nelson				
Net ID	audreyn				*
Email Address	audreyn@email.arizona.edu				
College/Division	College of Education				
Department/ Unit	Department of Disability & Psychoeducational Studies				
Status 🔲 Unde	ergraduate Student		e Student 🔲 Res	ident	culty Staff
Additional Contact (Th	ese individuals will r	eceive copies	of this corresponde	ence):	
Add Line Nar	ne	UA Net ID	Research Role	Institution	Email Address
Delete Line				-	
		Funding Infor			
Will the project be using/re			g types to support	the research:	
No funding supporting		:h			
Federal funding (e.g., N	IIH, NSF, DoE, DoD)				
Foundation Funding					
Departmental Funds					
Gift Funds					
Industry Funded					



Determination of "Research" 45 CFR 46.102(I): Research - a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. A systematic approach involves a predetermined system, method or a plan for studying a specific topic, answering a specific question, testing a specific hypothesis, or developing theory. A systematic approach includes the collection of information and/ or biospecimens, and analysis either quantitative or qualitative. Activities designed to develop or contribute to generalizable knowledge are those activities designed to draw general conclusions, inform policy, or generalize outcomes beyond the specific group, entity, or institution (i.e., to elaborate, to be an important factor in identifying or expanding truths, facts, information that are universally applicable). 1. Does the proposed activity involve a systematic approach? □No 2. Is the intent of the proposed activity to develop or contribute to generalizable knowledge? ∏No If Yes to BOTH questions the study is Research. Proceed to Section: Determination of "Human Subject." If the answers to one or both questions are NO, proceed to Section: Determination of "Human Subject" per FDA Regulation. **Determination of "Human Subject"** 45 CFR 46.102(e): Human subject - a living individual about whom an investigator (whether faculty, student, or staff) conducting research obtains: (1) data through intervention or interaction with the individual; or (2) identifiable private information. Intervention includes both physical procedures by which information is gathered (for example, venipuncture) and manipulations of the subject or the subject's environment that are performed for research purposes. Interaction includes communication or interpersonal contact between investigator and subject. Private information includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record information). Private information must be individually identifiable. Identifiable is where the identity of the subject is or may be ascertained by the researcher, or will be associated with the information. The research could involve the use of coded data/specimens. 1. Does the activity involve obtaining information about living individuals through intervention or interaction with the individuals? Yes ⊠No 2. Does the activity involve obtaining identifiable and private information about living individuals?

□Yes



⊠No

If YES to either question, the research activity is research that involves human subjects. STOP and submit an IRB application for approval of human research.

the answers to one or both questions are NO, proceed to Section Determination of "Human Subject" per FDA Regulation.
Determination of "Human Subject" per FDA Regulations
21 CFR 50.3(g): Human subject - an individual who is or becomes a participant in research, either as a recipient of the test article or as a control. A subject may be either a healthy human or a patient.
*Test article means any drug (including a biological product for human use), medical device for human use, human food additive, color additive, electronic product, or any other article subject to regulation.
** In vitro diagnostic products are those reagents, instruments, and systems intended for use in the diagnosis of disease or other conditions, including a determination of the state of health, in order to cure, mitigate, treat, or prevent disease or its sequelae.
 This is a clinical investigation involving a test article including in vitro diagnostics with a human subject(s) or their biospecimens? Yes No
Note: The FDA regulations (21 CFR Parts 50 and 56) apply to all clinical investigations regulated by FDA, as well as other clinical investigations that support applications for research or marketing permits. Therefore, all studies of investigational IVDs that will support applications to FDA are subject to 21 CFR Parts 50 and 56, even if they are not subject to most requirements of 21 CFR Part 812. For more information see the FDA Guidance on In Vitro Diagnostic Device Studies - FAQs.
Coded private information and/or human biological specimens per OHRP
Coded means a living individual's identifiable information such as name or social security number has been replaced by a code, such as a number, letter, or combination thereof and there is a key to link the code to the identifiable information of that individual. Coded data are considered identifiable under the Common Rule.
1. Does the activity involve the use of coded private information/specimens?
 □Yes □No 2. Were the information/specimens previously collected (or yet to be collected), specifically for the currently
proposed project?
□Yes
⊠No
Other Activities
(Please pick the most appropriate check boxes below)
Program Evaluation/Quality Improvement/Quality Assurance: The proposed activity will assess, analyze, critique, and improve current processes of program or health care delivery in an institutional setting, involving data-guided, systematic
activities designed to bring about prompt improvements in a program or health care delivery?



Course-Related Activities: The proposed activity is limited to course-related activities designed specifically for educational or teaching purposes?			
Case Report: The proposed activity is a case report or case series of no more than three (3) cases describing an interesting treatment, presentation, or outcomes?			
Oral History: The activity is limited to oral history activities, such as open ended interviews that only document a specific historical event or the experiences of individuals without the intent to draw conclusions or generalize findings.			
Public Use Datasets: The activity is limited to analyzing information contained within a publically available dataset (Meaning, any person can find and use the data). NOTE: This does not include reviewing or analyzing information from social media.			
Journalism/Documentary Activities: The activities are limited to investigations and interviews that focus on specific events, views, etc., and that lead to publication in any medium (including electronic), documentary production, or are part of training that is explicitly linked to journalism. There is no intent to test a hypothesis?			
Purchased cell lines: The activity involves commercially available, de-identified non-human embryonic cell lines.			
Limited Data Set: A limited data set is a data set that is stripped of certain direct identifiers specified in the Privacy Rule. A limited data set may be disclosed to an outside party without a patient's authorization only if certain conditions are met. Please go to the following link to review the Use Agreement (DUA) from the HIPAA Privacy Program			
dbGap: Receipt of data from dbGap that requires IRB approval, but the data you will receive. Investigators must also submit an Institutional Certification form to be completed and signed by the Investigator and IRB.			
from the covered entity by the researcher in the course of the review.			
PHI of Decedents: The use or disclosure is solely for research on the PHI of decedent, the PHI is necessary for research purposes and if requested the Principle Investigator will be required to provide documentation of the death of the individual(s).			
Native American/Alaskan Native: The activity involves access to tribal resources (e.g. cultural artifacts, environmental samples, or people), but the activity is not intended to produce generalizable knowledge. Please attach a copy of completed Appendix for Vulnerable Populations.			
Section 2: Summary			
1. Provide a concise description of the purpose or objectives of the project.			
To evaluate the effects of stress, sleep hygiene, and exercise on academic engagement in undergraduate students.			

To evaluate the effects of stress, sleep hygiene, and exercise on academic engagement in undergraduate students. Including the moderating/mediating effects that the self-care practices of exercise and sleep hygiene may have on the relationship between stress and academic engagement, and the hierarchical influence of the effects of stressful life events, sleep hygiene, and exercise on academic engagement.

2. Describe the proposed methods and study procedures.

The included questionnaires were meant to determine the following: student's demographics including age, ethnicity, class standing, and gender; the Undergraduate Stress Questionnaire (USQ) to measure recent stressful life events, the Sleep Hygiene Index (SHI) to measure positive sleep practices, the Leisure Time Exercise Questionnaire (LTEQ) to evaluate exercise habits; and the Student Course Engagement Questionnaire (SCEQ) to determine self-reported levels of academic engagement.

3. Describe the subject population, or the type of information/specimens to be studied.

The current research will be based on previously collected data. The proposed data set of participants included 203 undergraduate students who were part of the educational psychology research pool at a large southeastern university. An university IRB approved all study procedures. The data was obtained by consent of the PIs of the



original project.					
4. Explain where the information/specimens were collected	ed/ohtained (i.e. identify source of data/engelmana)				
4. Explain where the information/specimens were collected/obtained (i.e. identify source of data/specimens). NA- Activity does not involve the use of data/specimens					
Banner University Medical Center- Medical Records					
□Clinical Research Data Warehouse (CRDW)					
☑ Other					
Are they a <u>Business Associate</u> or Collaborator? Business Associate means a person or entity that performs certain activities or functions that involve the use or disclosure of PHI on behalf of, or provide services to, a Covered Entity.					
□Yes					
⊠No					
Explain how the information/specimens will be provided to already existing, de-identified data set, etc.).					
The investigator will be provided an already existing, de-ide Florida.	entified data set that was collected at the University of				
Section 3: Location of Research					
☐ Banner - University Medical Center ☐ University of Arizona Cancer Center					
☑ University of Arizona Campus					
The current study using the pre-existing data set will take place at the	a University of Asizona				
Outside the US	c offiversity of Arizonia.				
Online					
Other					
You have now complete	d this form. Navt stans:				
You have now completed this form. Next steps: 1) Please save a copy of this document for your records.					
2) Email the form to the appropriate individuals for their approval.					
3) Once it is ready email the application and attach all additional documents to vpr-irb@email.arizona.edu. Please					
review HSPP Guidance for any additional documents that are needed.					
Principal Investigator					
l certify that the information I provide in this application is correct and complete.					
Attestation of Principal Investigator					
Audrey Nelson	04/18/2018				
Typed Name of Principal Investigator	Date				
	16.				



NOTE: A research proposal by a graduate or undergous signed by an Advisor or Mentor.	raduate student must have the following attestation statement
Advisor/ Mentor	*
By signing below, I, the Advisor/ Mentor, certify that regarding completion of the items listed above.	at I have accurately reviewed and mentored the student/resident
MS	4/20/18
Signature of Faculty Supervisor	Date
Dr. Michael Sulkowski,	
Print Name and Title of Faculty Supervisor	
NOTE: Actual signature is not required. The HSPP signature. This means that all signatures might no your submission.	Office will accept either email confirmation or an actual of the on the same document. Attach email confirmations with