

<i>Policy</i>	3.1.1	<i>Section</i>	3	Membership	<i>Completion Date</i>	1/20/2001 Rev6/08
<i>Subject</i>	Institutional Membership				<i>Pages</i>	2
					<i>Approved by</i>	EC 5/02 Rev12/07

There are three criteria for institutional membership in COG: competence, commitment and compliance.

Institutional Membership Competence Requirement: A COG institution must meet the general criteria and guidelines for pediatric cancer centers established and published by the Section on Hematology-Oncology of the American Academy of Pediatrics and the American Society of Pediatric Hematology/Oncology. The institution must have the ability to deliver multidisciplinary children’s cancer care with appropriate support systems, as summarized in the COG Policy Manual Section 3.1.2.

Member institutions are independently administered hospitals, medical centers or research institutes with which one or more qualified individual members are affiliated. However, when members function in more than one hospital or institution under the scientific and administrative purview of a single director of pediatric hematology/oncology, these eligible hospitals and institutions comprise a single member institution with one IRB per the Clinical Trials Monitoring Branch definitions of an institution. Separate entities must be able to stand alone as hematology/oncology centers, as defined in Policy 3.1.2 of the Group Administrative Manual. It is recognized that not all COG member institutions have all care and support facilities in one location, but certain minimum requirements are expected. See Policy 3.1.2. CCOP institutions may have more than one IRB per NCI guidelines but must identify one local administrative contact for COG.

The institutional investigators must treat a minimum of 12 newly diagnosed cancer patients each year (based on a three-year rolling average). This will be evaluated utilizing enrollments to the ACCRN07 for North American institutions and absolute audit requirements (5.1) for non-North American institutions. See policy (5.1)

Institutional Membership Commitment: A COG member institution should be committed to enroll patients on to therapeutic and non-therapeutic trials. This is important, irrespective of the institution’s size. Please refer to audit requirements policy for minimum numbers for provisional and routine audits. (5.1)

Institutional Membership Compliance: Compliance refers to documentation of both data management and tissue acquisition capabilities that guarantee participation in therapeutic and non-therapeutic trials. Bi-yearly data delinquency scores are tabulated and institutions with less than 90 percent will be suspended until they are above that benchmark. (5.1)

Provisional Membership Status: All new member institutions have provisional status for the first 18 months following the granting of membership. It is recognized that new member institutions require time to have COG protocols approved and activated by their Institutional Review Boards. The provisional institution will be evaluated during this 18 month period with

an audit and must have a minimum of 5 therapeutic enrollments in the first 18 months at the time of the audit. If unable to meet this criterion, their membership will be terminated with no recourse.

Registry of New Malignancies in Children and Adolescents: Each member institution should report new diagnosis of cancer seen at the institution through enrollments on the ACCRN07 protocol. This is a non-therapeutic protocol and requires patient and or parental consent for participation.

Voting Body: Each COG member institution in good standing has one vote in the Voting Body through its PI. Provisional or suspended institutions do not have a vote. For written ballots this vote may be split, and the PI must assure the participation of all full individual members at his/her institution and poll them in relevant voting decisions.

Group Administrator: Joan Madden-Ceballos

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