Published by the Alzheimer Association, this article provides recommendations for IRBs and investigators that can be used to customize the informed consent process for individuals with cognitive impairment. The article also provides guidelines for developing institutional policies for research involving this special population.

**Main Action Items:**

- IRB application forms should identify cognitively impaired individuals as a vulnerable population.
- Investigators should include screening procedures and assessment of the capacity of individuals to understand the nature of the research and the consequences of participation in the protocols.
- Reassessment of consent and assent should occur on a regular basis.
- If capacity is impaired, permission from a proxy and assent from the individual is required unless the IRB waived the requirement.
- Everything must be documented.

**Definition, Key Considerations, and Shortened Version of the Recommendations**

**Definition:**
The term “cognitive impairment” generally refers to dementia, delirium, or other cognitive syndrome as defined in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV), American Psychiatric Association, Washington, DC. 1994.

1. Key considerations for research involving cognitively impaired persons:

   a) Cognitive impairment is not always associated with the lack of capacity for informed consent to research.

   b) Individuals who cannot themselves consent to participate due to cognitive impairment may be enrolled in research projects if the following three conditions are met:

      i) The research offers a reasonable likelihood of a direct health-related benefit to the individual; if there is no prospect of health-related benefit to the individual, then the research must pose no more than a minor increment above minimal risk, as
determined by the IRB, and is likely to yield generalizable knowledge about the participant’s disorder or condition.

ii) Informed consent for research is provided by someone who, under state or federal law, has the legal authority to make such decisions for the participant, and

iii) The individual with the cognitive impairment assents to participation if capable, or does not dissent.

c) Enrollment into research of a cognitively impaired individual who is unable to give consent generally should not occur if the research presents greater than a minor increment over minimal risk and does not offer a reasonable prospect of a health-related benefit directly resulting from the research procedures.

2. Identifying At-Risk Populations

The IRB application forms should include a check-off box in the section on vulnerable populations where investigators are asked to address the risk for incapacity related to cognitive impairment.

3. Assessment

Screening
Investigators should consider whether to specify a screening procedure in their protocols and, if they decide not to do so, they must justify this decision to the IRB. Screening for cognitive impairment should not be confused with screening for incapacity to consent to research.

Assessing capacity for consent to a specific research study
The protocol should describe how the investigator would conduct a capacity assessment and the nature of the assessment. At a minimum, the investigator must review and discuss the research project, and the consent document, with the potential participant and decide whether he or she is able to:

- Understand the nature of the research and of his or her participation
- Appreciate the consequences of participation
- Show the ability to consider alternatives, including the option not to participate
- Show the ability to make a reasoned choice

4. Action if Capacity is Impaired

Permission and Assent
Ordinarily, the investigator must obtain permission from a proxy, with both actual capacity and legal authority to give it, and assent from the participant. Permission or assent need not be obtained if an IRB has waived the requirement.
Identifying a Proxy
Where possible, permission should be sought from someone who, under state law, has the right to be the participant’s legally authorized representative following the priority level as listed below:

1) Legal guardian
2) Proxy (research agent)
3) Proxy (health care agent)
4) Family member

Permission from the Proxy
The informed consent form should include instructions to the proxy to base his or her decisions on the participant’s expressed wishes or, in the absence of expressed wishes, the decision should be based on the participant’s best interests.

Assent from the Participant
If the participant is capable of providing affirmative agreement to participate, the investigator should explain the procedures, risks, benefits, and alternatives involved to the participant in a simple manner.

5. Capacity Impairment in the Course of Research

Risk of Loss of Capacity
If at the time of enrollment a participant who has the capacity to consent is known to be at risk for loss of that capacity, the investigator must show a plan for reassessment and offer the participant the opportunity to appoint a proxy.

Apparent Loss of Capacity
If a participant who gave consent personally appears to lose capacity during the study, the investigator must formally assess the participant’s capacity to consent, and if the capacity is impaired, obtain permission for further research participation from a proxy.

Intermittent Capacity
In the case of intermittent capacity, periodic reevaluations are indicated.

6. Documentation

Proper documentation of the process above must be kept in the participant’s study records.