

Reviewer:

PRO #

PI:

<b>Document contains an understandable description of:</b>				
All basic required elements as listed on the "Informed Consent" Guidance Poster (HRPP Program Guide Section 2.5 Appendix A) and IRB Committee Members website and 45 CFR 46.109, 45 CFR 50.25 21 CFR 56.109(b).				
1.	Explanation of research purpose/reason for selection.	<input type="radio"/> Yes	<input type="radio"/> No	
2.	Adequate description of all procedures/activities.	<input type="radio"/> Yes	<input type="radio"/> No	
3.	An explanation of the expected duration of the subject's participation.	<input type="radio"/> Yes	<input type="radio"/> No	
4.	Description of reasonably foreseeable risks/discomforts.	<input type="radio"/> Yes	<input type="radio"/> No	
5.	Description of anticipated benefits to subjects or others.	<input type="radio"/> Yes	<input type="radio"/> No	
6.	Description of all alternative courses of treatment.	<input type="radio"/> Yes	<input type="radio"/> No	
7.	Description of all costs of participation and any additional costs to subjects resulting from research participation.	<input type="radio"/> Yes	<input type="radio"/> No	
8.	Information on subject compensation, amount, and payment schedule.	<input type="radio"/> Yes	<input type="radio"/> No	
9.	Identification of all experimental procedures/test articles.	<input type="radio"/> Yes	<input type="radio"/> No	
10.	Data sharing statement that de-identified information or biospecimens may be used for future research or that they will never be used for this purpose.	<input type="radio"/> Yes	<input type="radio"/> No	
11.	For tests articles (regulated by the FDA), a statement that "the purpose of the study includes evaluation of both the safety and the effectiveness of the test article".	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
12.	Clearly separates research component from any concurrent medical treatment.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
13.	A statement that subject will be notified of significant new findings during the course of the study.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
<b>Additional elements of disclosure, when appropriate:</b>				
14.	A statement that the particular treatment or procedure might involve risks to the participant, which are currently unforeseeable.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
15.	A statement that if the participant is or becomes pregnant, the particular treatment or procedure might involve risks to the embryo or fetus, which are currently unforeseeable.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
16.	Anticipated circumstances under which the participant's participation might be terminated by the investigator without regard to the participant's consent.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
17.	The consequences of a participant's decision to withdraw from the research.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
18.	Procedures for the orderly termination of participation by the participant.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
19.	The approximate number of participants involved in the study.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA

20.	A statement that the subject's biospecimens may be used for commercial profit and whether the subject will or will not share in this commercial profit.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
21.	A statement regarding whether clinically relevant research results, including individual research results, will be disclosed to subjects, and if so, under what conditions.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
22.	For research involving biospecimens, whether the research will or might include whole genome sequencing.	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
<b>Vulnerable population requirements:</b>				
23.	Does the study involve cognitively impaired participants? If yes, complete the checklist for Cognitively Impaired Persons.	<input type="radio"/> Yes	<input type="radio"/> No	
24.	Does the study involve children? If yes, complete the checklist for Children.	<input type="radio"/> Yes	<input type="radio"/> No	
<b>Standard Paragraphs included stating:</b>				
25.	A statement describing the extent, if any, to which confidentiality of records identifying the participant will be maintained	<input type="radio"/> Yes	<input type="radio"/> No	
26.	An explanation of whom to contact for answers to pertinent questions about the research.	<input type="radio"/> Yes	<input type="radio"/> No	
27.	An explanation of whom to contact for answers to pertinent questions about the research participants rights.	<input type="radio"/> Yes	<input type="radio"/> No	
28.	An explanation of whom to contact in the event of a research-related injury to the participant.	<input type="radio"/> Yes	<input type="radio"/> No	
29.	Contact information for the research team for questions, comments, concerns or complaints.	<input type="radio"/> Yes	<input type="radio"/> No	
30.	Contact information for someone independent of the research team for problems, concerns, questions, information or input.	<input type="radio"/> Yes	<input type="radio"/> No	
31.	A statement that participation is voluntary.	<input type="radio"/> Yes	<input type="radio"/> No	
32.	A statement that refusal to participate will involve no penalty or loss of benefits to which the participant is otherwise entitled.	<input type="radio"/> Yes	<input type="radio"/> No	
33.	A statement that the participant may discontinue participation at any time without penalty or loss of benefits to which the participant is otherwise entitled.	<input type="radio"/> Yes	<input type="radio"/> No	
<b>HIPAA Authorization</b>				
34.	If the research involves access to, use of, or disclosure of Protected Health Information (PHI), does the consent and/or standalone HIPAA Authorization include all required elements of a HIPAA Authorization?	<input type="radio"/> Yes	<input type="radio"/> No	
<b>VA-Funded Research</b>				
35.	Informed Consent is on VA Form 10-1086	<input type="radio"/> Yes	<input type="radio"/> No	
36.	Informed Consent includes a statement that in the event of a research-related injury the VA will provide necessary medical treatment to a participant injured by participation.	<input type="radio"/> Yes	<input type="radio"/> No	
37.	Informed Consent includes a statement that a veteran-participant does not have to pay for care received as a participant in a VA research project except in accordance with federal law and that certain veterans have to pay co-payments for medical care and services provided by the VA.	<input type="radio"/> Yes	<input type="radio"/> No	
38.	As appropriate, the VA standard consent language is included for (check as applicable):	<input type="radio"/> Yes	<input type="radio"/> No	

<input type="checkbox"/>	Commercial Products		
<input type="checkbox"/>	Future use of data		
<input type="checkbox"/>	Payment for participation in the study		
<input type="checkbox"/>	Photographs, voice and/or video recording (including use of VA Form 10-3203)		
<input type="checkbox"/>	Future use of specimens		
<input type="checkbox"/>	Re-contact		
<input type="checkbox"/>	Disclosure of results		
<b>FDA-Regulated Research</b>			
39.	A statement that notes the possibility that the Food and Drug Administration may inspect the records.	<input type="radio"/> Yes	<input type="radio"/> No
<b>Research Involving More than Minimal Risk</b>			
40.	An explanation of whether any compensation is available if injury occurs.	<input type="radio"/> Yes	<input type="radio"/> No
41.	If compensation is available if injury occurs, what it consists of, or where further information may be obtained.	<input type="radio"/> Yes	<input type="radio"/> No
42.	An explanation as to whether any medical treatments are available if injury occurs.	<input type="radio"/> Yes	<input type="radio"/> No
43.	If medical treatments are available if injury occurs, what it consists of, or where further information may be obtained.	<input type="radio"/> Yes	<input type="radio"/> No