

**OKLAHOMA STATE UNIVERSITY
CENTER FOR HEALTH SCIENCES**

**APPLICATION TO HONEST BROKER TO CREATE A
DE-IDENTIFIED DATA OR LIMITED DATA SET**

[This form should be completed if all the health information required for use in the proposed research activity may be conducted with all of patient/participant identifiers listed below are removed. If all of these identifiers are removed prior to use, then the research activity is considered exempt from the requirements of the federal privacy law (HIPAA). The participant identifiers will be removed by an Honest Broker certified by the OSU-CHS Research Office.]

TITLE: _____

PRINCIPAL INVESTIGATOR: _____

IDENTITY OF HONEST BROKER: _____

1. _____ I request that the Honest Broker identified above create a set of de-identified data from the following data base(s): _____

The following patient/participant identifiers will be removed by the Honest Broker:

- Names (individual, employer, relatives, etc.)
- Address (street, city, county, precinct, zip code except, e.g., for the initial 3 digits if the geographic unit contains less than 20,000 people, any other geographic codes)
- Telephone numbers
- Fax numbers
- Social Security Numbers
- Dates directly related to an individual, except for years (birth date, admission date, discharge date, date of death, ages > 89 and all elements of dates indicative of such age, except that such age and elements may be aggregated into a category 'age > 90')
- Electronic mail (e-mail) addresses
- Web Universal Resource Locators (URLs)
- Internet Protocol (IP) address numbers
- Medical Record numbers
- Health plan beneficiary numbers
- Account numbers

- Certificate/License numbers
- Vehicle Identifiers and Serial numbers (e.g., VINs, License plate numbers)
- Device identifiers and Serial numbers
- Biometric Identifiers (e.g., finger or voice prints)
- Full face photographic images and any comparable images
- Any other unique identifying number, characteristic, or code

2. _____ I request that the Honest Broker create a Limited Data Set. The following patient/participant identifiers will be removed by the Honest Broker:

- Names;
- Street address/Postal address information, other than town or city, State, and zip code;*
- Telephone and fax numbers;
- Electronic mail addresses;
- Social security numbers;
- Medical record numbers, health plan beneficiary numbers or other account numbers;
- Certificate/license numbers;
- Vehicle identifiers and serial numbers, including license plate numbers
- Device identifiers and serial numbers;
- Web universal resource locators (URLs) or Internet protocol (IP) address numbers;
- Biometric identifiers, including finger and voice prints; and
- Full face photographic images and any comparable images.

*[*Unlike de-identified data, the limited data set may include five-digit zip code or any other geographic subdivisions, such as State, county, city, precinct and their equivalent geocodes. These geographic designations are permitted in order to support a range of research and public health activities, such as the analysis of local variations in disease burdens or statistics on the provision of health care services.]*

Signature of Principal Investigator

Date

FOR IRB USE ONLY

IRB No.: _____

Reviewed by: Convened IRB

IRB Chair or Vice Chair pursuant to expedited procedures

The application for use of de-identified information is:

- Approved because all patient/participant identifiers will be removed by the Honest Broker Certified by OSU-CHS
- Approved because a Limited Data Use Agreement has been signed and the Honest Broker Certified by OSU-CHS will create the Limited Data Set
- Not approved (*explanation*)

Comments:

Signature of IRB Chair or Vice Chair

Date

Print Name