

OKLAHOMA STATE UNIVERSITY
CENTER FOR HEALTH SCIENCES
COLLEGE OF OSTEOPATHIC MEDICINE
INSTITUTIONAL REVIEW BOARD

APPENDIX D EXAMPLES OF LANGUAGE USEFUL IN INFORMED CONSENT FORMS

Because projects can vary so widely, particular language may vary considerably to reflect the needs of the investigator. A series of examples are included which may be helpful.

The Consent Form - Purpose

This paragraph should tell participants why they are being asked to participate and what the purpose of the study is, relative to the participant. This purpose should match the purpose outlined in the protocol of the study. There may be some circumstances, primarily in surveys or psychological studies, where giving the specific purpose will prejudice the answers given by the participants or will eliminate part of the target population. An example would be a study examining the psychological impact of childhood sexual abuse. In such an instance, a cover letter is necessary explaining why the study's purpose is not precisely the consent's purpose.

Example #1:

You have been asked to participate in this research study because you have been recently found to have a cancer in the kidney called renal cell carcinoma. It had spread outside the boundaries of the kidney and so the surgery was not able to remove all the cancer. This form of cancer does not respond to any standard drugs used for chemotherapy and thus no cure is possible with them. It also does not respond to radiation treatment. This study will examine the effect of an experimental drug called [name of drug] in combination with the drugs _____ and _____, to see if this combination of drugs lengthens the life of patients with your disease. Both the response to the drugs and their side effects will be studied.

Example #2:

You are giving consent for your child and this research study is designed to gather information about the effects of the legal process on children who have been involved in the legal process as witnesses or potential witnesses in cases of child physical abuse or sexual abuse. There is wide spread belief that the legal process is difficult for children and may even traumatize them. The investigators hope to obtain information about the child's view of the process, what caused problems and what was or could have been helpful.

Example #3:

The purpose of this research study is to evaluate how diet and exercise affect hypertension. You are invited to participate because you have been diagnosed with hypertension or you are serving as a healthy volunteer.

The Consent Form - Status of the Drugs, Devices and/or Procedures

This section is appropriate for many but not all studies. Its purpose is to tell the participant whether the drug(s), device(s), or procedure(s) in the study are experimental or investigational for the purposes for which they will be used in the study. It may be that it is the combination or the dosage which is experimental, or the combination with other modalities of treatment. Remember in this section that FDA stands for Food and Drug Administration, not Federal Drug Administration. Also, it may be confusing to say that the FDA has approved the investigational

use of a drug; it would be better to state that the drug is not approved by the FDA for this use. If the study does not involve any drugs, devices or procedures, omit this section.

Example #1:

All the drugs to be used in this research study are approved by the Food and Drug Administration for treatment of some forms of cancer. However, the combination of the drugs, plus the use of a relatively low dose of Cisplatin, is not standard therapy for my kind of cancer.

Example #2:

This procedure is commonly used in the treatment of patients with irregular heart rhythms which start in the lower part of the heart. However, its use in patients like you, with the irregular heart rhythm starting in the upper part of the heart, is not accepted therapy.

Example #3:

[Name of drug] is an investigational drug not approved by the Food and Drug Administration. [Drug] is a new type of antihypertensive which is used to lower blood pressure.

The Consent Form - Description of Study

This section of the protocol is very important, as it tells the participant what will happen. It should be complete but optimally will be concise. In order to make it easier to read, divide the description into paragraphs. If there are separate phases to the study, each phase should be described in a separate paragraph. The participant's participation should be described in chronological sequence. The description of study must be written in lay language, with complex medical terminology explained in simple terms. It should specifically address if hospitalization will be required and for how long; if procedures will be done on an outpatient basis, that should be stated with the expected duration.

It should address whether participants will be divided into groups and how that will be done (e.g., randomly, like the flip of a coin; randomly, like the roll of a die, into ___ number of groups). It should also include any use of placebo (*inactive medication tablet or capsule*) and whether it will be single blind (*your doctor but not you will know*) or double blind (*neither you nor your doctor will know which medication you are receiving, but if that becomes important for your care, the code can be broken to find out*) in design. The use of the following terms is irrelevant for the participant: blind, placebo-controlled, parallel design, crossover. If the study involves standard therapy of the disease with addition of new drugs/procedures or with changes in doses of current medication, that should be stated. If the main thrust of the study is testing blood or doing blood levels, the amount of blood to be drawn should be included (5cc = 1 teaspoon, 15 cc = 1 tablespoon, 4 tablespoons = 1/4 cup).

Example #1:

The standard therapy of your disease would be the use of [these four drugs] to induce or cause a remission. The experimental part of the study will be to add [new drug] at this time. The standard therapy would be given in 4 cycles given every 28 days, with hospitalization required for the first 4 days and taking [name of old drug] by mouth once a day once you are discharged. You will receive [new drug] once a day while you are in the hospital, but it will not lengthen your time in the hospital.

Once you go into remission, when the disease is no longer detectable by examining your blood or bone marrow, you will begin what is called maintenance therapy, which will try to keep the disease from coming back. At this time, you will be randomly assigned, like the flip of a coin, to either treatment with [these four drugs] or [those five drugs]. The use of [these four drugs] is standard accepted maintenance therapy. For that treatment, every

28 days you will come to the clinic for treatment into the vein with _____ and _____. You will then take _____ for the next 5 days by mouth, then begin _____, by mouth until the next cycle starts. The treatment with [those five drugs] would also be every 28 days, but you will have frequent clinic visits, x-rays, blood and urine tests to monitor the response to the therapy and also to watch for side effects.

You will continue this maintenance therapy until your disease recurs, until you have received a total of 15 months of maintenance therapy, or until you have side effects which make it necessary to stop. During this treatment, you will have frequent clinic visits, x-rays, blood and urine tests to monitor the response to the therapy and also to watch for side effects.

Example #2:

If you agree to participate in this research study, you will be given a questionnaire to complete. This questionnaire will ask you general questions about your background and will also ask you about pleasant and unpleasant experiences you have had when you have been ill and gone to see a doctor. You will not put your name on it, nor will there be any identifying marks on it, so that the investigators and your doctor will not know that you were the person filling out this particular questionnaire. About 45 minutes of time will be required to complete the form. After you finish it, you will put it into the stamped addressed envelope provided. If you decide you don't want to be in the study, you will not return the form.

Example #3:

Your participation in this research study is limited to having blood drawn to be tested for these new antibodies. The investigators will attempt to have the blood drawn when you are having blood drawn for other reasons. The amount of blood will be 30 cc (2 tablespoons). For most participants, this will only be drawn once. If there are high levels of this antibody in my blood, you may be asked to give verbal permission to have more blood drawn, no more than 4 tablespoons at a time and no more often than every two months. You may however decide not to allow more blood to be drawn, if you so choose.

The Consent Form - Costs

This section follows the Description of Study. The intent is to tell the participant who will be financially responsible for the costs (charges) of all parts of the study. Sometimes the participant (or his/her insurance company) bears the charges, other times the sponsor, and sometimes the charges are shared. No answer is "right", but the participant should be told in clear language.

Example #1:

You or your insurance company will be responsible for charges incurred for the drugs and tests provided in this study because the drug used is commercially available and the tests done are part of the standard treatment for your disease. However, you will not be responsible for charges from the testing of the tissue from your cancer.

Example #2:

The drugs will be provided free by the sponsor. All charges for the clinic visits, blood, urine and other tests will be paid by the sponsor.

Example #3:

The drug will be provided free by the sponsor, but you or your insurance company or other carrier will be responsible for the other charges incurred in this study. In addition, should the drug become commercially available during the study, you will then become responsible for its purchase.

The Consent Form - Risks

Risks may be physical or mental. Any reasonably foreseeable risks or side effects should be included, as well as any inconvenience the study would add. Any measures which will be taken to minimize the risk should be included. Adverse effects which have occurred in the past only once or twice need not be mentioned. If there is enough clinical experience with the drug to be able to define common, infrequent, uncommon and rare side effects, the risks can be divided in this way. Sometimes percentages are available and very useful. (*These side effects are common and occur in 30-50% of patients.... The following occur less often, 5-10%.... The following occur in 1-5%..... Rarely (fewer than 1 in 500 patients) the following are seen....*) If more than one drug or procedure is involved, they should be addressed individually. If several chemotherapy drugs are to be given, however, please have a general chemotherapy paragraph (e.g., *nausea, vomiting, decreased white blood cells, decreased platelets, loss of hair, mouth ulcers*), then list the other side effects that are specific to each drug. Alternately, the side effects can be listed and the drugs which could cause them listed.

The risks of procedures that are part of standard therapy or evaluation should either not be included (e.g., bone marrow aspiration, CT scans) or should be mentioned with the statement that a separate consent will be obtained for them (e.g., placement of infusion catheters, operations to evaluate the completeness of response to the therapy). If a central part of the study is to draw blood for testing, the risks of venipuncture should be included (i.e., *"The risks of drawing blood are pain, bruising or feeling faint. Infrequently infection or clotting in the vein may occur"*). In some studies the risks of pregnancy may require attention, as well as the risk of sterility. In such cases, it must be stated that an effective means of birth control is necessary to prevent pregnancy. It is preferable to specify what are considered to be acceptable forms of birth control. The risk section should also mention that there is the possibility that the participant will have side effects which have not been recognized before.

It may be appropriate to add a statement that the participant may be removed from the study without his/her consent if side effects become severe, or under any other circumstances which may be predictable. Another helpful statement is that the participant will be made aware of significant new findings which might affect his/her decision to remain in the study.

Example #1:

The primary risk of participating in this research study is the development of side effects from the medications. A rash has been seen in 10-20% of patients. Other side effects have occurred in less than 1% of patients and include constipation, nausea, swelling of the ankles and insomnia. If you have any side effects, you should report them promptly to your physician. If side effects become severe, you may be removed from the study.

Example #2:

The potential effects of these drugs on the growing fetus are not known but would be expected to include serious birth defects. If you are a woman and you suspect or know that you have become pregnant, you will contact the physician immediately. You also understand that the effect on developing sperm is also not known and if you are a man, you should take precautions not to father a child during the study.

Example #3:

The primary risk for this research study is that your child will relive the unpleasant experiences while completing the questionnaires and having the interview. In order to see how to help children who have testified in court, it is necessary to talk with them and see how they thought at the time and what effects it had over time. If the amount of anxiety seems exaggerated or abnormal, you will be informed and also referral for counseling will be provided.

Example #4:

The only risk in the study is that of drawing blood. A bruise may occur at the site and there may be minor pain at the time. Fainting occasionally occurs and infection rarely occurs.

The Consent Form - Benefits

There may be no direct benefit. The IRB does not allow the benefit to society or advancement of medical science to be included in this section. If there are no direct benefits, so state.

The Consent Form - Alternative to Participation

In this section, the alternative to signing up for the study is addressed. In most cases, the alternative would be the standard treatment or therapy, e.g., a specific drug, chemotherapy, radiation. But sometimes this concept is difficult to describe, as it may be that standard therapy is one of the options in the study. For example, it may be that observation (which is standard) is one arm and aggressive adjunct therapy (to prevent disease recurrence) is the other. In this case, although the study may provide more aggressive therapy, it may not be effective and may have serious side effects. There are occasional protocols which state that the “control group” will be composed of participants who refused to be randomized. The participants should be informed of this use of their data and must be given the opportunity to refuse such use.

The alternative for the typical non-risk study is simply not to participate.

Example #1:

If you choose not to participate in this research study, your physician will probably recommend the standard therapy, which is the use of cisplatin, vincristine and bleomycin, as used in the first arm of the study. Another choice is no treatment at all.

Example #2:

Surgery and radiation therapy are not useful in patients with your disease and/or they have already failed for me. There are no other alternative treatments which are accepted as effective or that are experimental and offer any greater chance of success than the treatment in this study. You may choose to not have any further therapy.

Example #3:

The alternative is not to participate.

The Consent Form - Compensation and Injury

This section has two purposes: 1) to define what medical care is available if injury is incurred and 2) to define what compensation is available in that instance. Both should be described as fully as possible. In the vast majority of instances, there is no compensation (payment over and above the coverage of medical costs) and that fact should be stated. The options for medical care are more varied. It may be that the medical care will be provided, with the sponsor paying anything not covered by third party coverage. Another more common circumstance is that the medical care will be available but the patient, and any coverage sources he/she has available, will be responsible for the charges. In rare circumstances, the patient must seek his/her own medical care and is responsible for payment.

Example #1: No coverage for injury; no compensation

If you are injured, medical treatment for the injury will be available to you, but you or your insurance carrier will be required to pay the usual fees for that treatment. You

understand that no compensation will be available to you from the [hospital(s)], Oklahoma State University College of Osteopathic Medicine, or [the pharmaceutical company] unless you otherwise are covered by their health insurance or other employee health benefits. If you have questions or want further information about compensation or medical care, You may contact the Chief of Staff of [hospital(s)] at [phone number(s)].

Example #2: Company coverage for injury; no compensation

If you are injured, emergency medical treatment for the injury will be available to you. Furthermore, the sponsor [company name] will pay for any charges not covered by your insurance company. These charges may cover laboratory tests, examination, procedures like X-rays, or hospitalization. This coverage is limited to injury resulting from the administration of the drugs involved with the study and does not apply to complications from any drugs or procedures not directly related to the study performance. It also does not apply if I was not taking the medication properly. No other compensation is available to you from [hospital(s)], Oklahoma State University College of Osteopathic Medicine, or [the pharmaceutical company] unless you otherwise are covered by their health insurance or other employee health benefits. If you have questions or want further information about compensation or medical care, you may contact the Chief of Staff of [hospital(s)] at [phone number(s)].

Example #3: Physician coverage for injury; no compensation

If you are injured, emergency medical treatment for the injury will be provided at no charge by Dr. [the study physician(s)]. This treatment may in addition involve other charges, from hospitals, laboratories or clinics, which will be billed to you and my insurance company. No other compensation is available to you from [hospital(s)], Oklahoma State University College of Osteopathic Medicine, or [the pharmaceutical company] unless you otherwise are covered by their health insurance or other employee health benefits. If you have questions or want further information about compensation or medical care, you may contact the Chief of Staff of [hospital(s)] at [phone number(s)].

Example #4: Required verbatim for all studies at OSU MC

Emergency medical care will be provided to you, but that its location may be either at TRMC (if you are eligible for care and/or hospitalization there) or at another hospital (if you am not eligible for care and/or hospitalization at the TRMC for this condition). If life-threatening injury occurs while you are at the TRMC, emergency care will be provided, regardless of whether you would be otherwise eligible for the treatment, until you can be transferred to another hospital if I am not eligible for care there. If I have any questions about your eligibility or your compensation for any injury, you may take them to the Director of Research, OSU-COM, 1111 West 17th, Tulsa OK or telephone number (918) 561-8241. My signature at the bottom of this form confirms that the physician explaining the study to you has discussed with you your care eligibility.