

## Section 10: Subject Population Groups and Enrollment

Here you will indicate the targeted population groups for participation in your study. Please note that including vulnerable populations (children, prisoners, pregnant women/neonates/fetuses) will result in increased oversight and scrutiny.

In addition, if you are including minors, Pediatrics will review your protocol as a specialty committee.

You can also exclude population groups from your study, such as pregnant women, if there are any potential risks for this group. A pregnancy test will need to be administered before participation by a trained study team member.

The maximum number of subjects to be consented at Duke should allow for participant dropout, etc. and still result in a sufficient population size to reach the research goals.

### 10. Subject Population Groups and Enrollment

<p><b>* Population Groups (Select <u>targeted</u> population groups only):</b></p> <p><input checked="" type="checkbox"/> <b>Adults</b></p> <p><input type="checkbox"/> Minors who are Wards of State</p> <p><input type="checkbox"/> Minors</p> <p><input type="checkbox"/> Patients</p> <p><input type="checkbox"/> Pregnant Women</p> <p><input type="checkbox"/> Fetuses</p> <p><input type="checkbox"/> Prisoners</p> <p><input type="checkbox"/> Adults incapable of giving consent</p> <p><input type="checkbox"/> Adults with diminished capacity</p> <p><input type="checkbox"/> Handicapped subjects</p> <p><input checked="" type="checkbox"/> <b>Students<sup>1</sup></b></p> <p><input checked="" type="checkbox"/> <b>Employees<sup>1</sup></b></p> <p><input type="checkbox"/> Healthy Controls<sup>2</sup></p> <p><input type="checkbox"/> Deceased subjects<sup>3</sup></p> <p><input type="checkbox"/> Blanket Protocol</p>	<p>If Minors are included, the study will be routed to the Department of Pediatrics Chair for Pediatric Risk Assessment.</p> <p><sup>1</sup>Students and Employees over whom Key Personnel have a supervisory role may <b>not</b> be enrolled in this study.</p> <p><sup>2</sup>Healthy Controls must be given a Notice of Privacy Practices.</p> <p><sup>3</sup>Complete and attach a Decedent Research Notification on page 13.2. Waiver of Consent and HIPAA Authorization.</p>
<p><b>Population Groups excluded from participation in this study:</b></p> <p><input checked="" type="checkbox"/> <b>Pregnant Women</b></p>	<p>If pregnant women are excluded from the study, a pregnancy test must be administered to eligible female subjects prior to enrollment.</p>
<p><b>* Maximum number of subjects to be consented at Duke:</b> 80</p> <p><b>Maximum number of subjects to be consented at all sites:</b></p> <p><i>For retrospective/repository studies:</i></p> <p><b>Maximum number of patient records / samples to be used:</b></p>	<p>Enter a single number. If you anticipate consenting a range of subjects, enter the <b>upper</b> limit of the range. The number should represent the maximum number of subjects for the life of the study.</p>

## Section 10.1: Subject Procedures and Costs

Make sure to include any potential costs to participants on the consent form.

### 10.1 Subject Procedures and Costs

#### Biobank

<p>* Does this study involve the collection, use, tracking, banking (storage) or distribution of human biological specimens?</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>	<p>Human biological specimens include blood or its components, healthy or diseased tissue, bodily fluids, DNA/RNA or human stem cells. For more information, see Duke Biobank under the Related Links section of the eIRB Home page.</p>
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#### Procedures

<p>Check all that apply:</p> <p><input type="checkbox"/> Genetic Testing</p> <p><input type="checkbox"/> Gene Transfer</p> <p><input type="checkbox"/> DNA Banking</p> <p><input type="checkbox"/> Testing for Reportable Infectious Diseases</p> <p><input type="checkbox"/> Human Cell Banking</p> <p><input type="checkbox"/> *Use of Human Embryonic Stem Cells</p> <p><input type="checkbox"/> *Use of Human-induced Pluripotent Stem Cells</p> <p><input type="checkbox"/> *Use of Other Cells Derived from Human Embryos</p> <p><input type="checkbox"/> *Use of Human/Animal Chimeric Cells</p> <p><input type="checkbox"/> *Specialized Cell Populations for Cell Therapy</p>	<p>* All Stem Cell Lines must be registered with the Duke University Human Embryonic or Induced Pluripotent Stem Cell Line Registry. A link to the registration form can be found under the "Related Links" section on the eIRB home page.</p>
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<p>Will blood be drawn in this study for research purposes?</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If Yes: Maximum amount to be drawn in any 8 week period (ml): Number of blood draws per week:</p>	<p>Enter blood volume in ml.</p>
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<p>Will the Operating Room be used in this study?</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>If Yes, Anesthesia time in minutes required (for research purposes):</p>	<p>Include only research time, not clinical care time.</p>
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#### Costs and Compensation

<p>* Will there be extra costs to subjects or insurance as a result of the research (e.g. tests, hospitalization)?</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>	
<p>* Will there be Subject Compensation?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>If Yes: Compensation for Travel / Lost Income: \$ Other Subject Compensation:</p>	