**ADDENDUM:** **CONSENT TO STORE**

**IDENTIFIABLE BIOSPECIMENS AND/OR INFORMATION**

**IN A RESEARCH REPOSITORY (BANK) FOR FUTURE RESEARCH**

**If this is inserted into a Parental/Guardian Permission form,**

* **change “consent” to “parental/guardian permission.”**
* **change “you” to “your child” where appropriate.**
* **change “me” or “my” to “your child(‘s)” where appropriate.**

**Insert the below language into the** [**16.301 (HRP-502a) or 16.302 (HRP-502b) consent**](https://research.rutgers.edu/researcher-support/research-compliance/human-research-protection-program/toolkit#tab=panel-1) **form AFTER the section titled “What will I be asked to do if I take part in this study?”. Replace instructional language (in BLUE) with language that applies to your research.**

*If the storage and use of biospecimens and/or information collected during the is not optional:*

**What will happen to my [Biospecimen or type of information] collected for this research?**

We will store some [specify-type/amount of Biospecimen or type of information] collected [Choose: ‘from or about you during’ OR [‘in addition to what was collected during the main study’] for future research. If you do not wish to have your [Biospecimen or type of information] you cannot participate in this project, and we ask that you do not sign this consent form.

*If the storage and use of biospecimens and/or information collected during the research is optional:*

**What will happen to my [Biospecimen or type of information] collected for this research?**

We would like to store some [specify-type/amount of Biospecimen or type of information] collected [Choose: ‘from or about you during’ OR ‘in addition to what was collected during the main study’] for future research. You may still participate in the research even if you say no to this request to store [choose: biospecimens and/or information about you] for future research.

*Insert for all – optional or not optional:*

**How and where will my [Choose: Biospecimens And/or Information] be stored and by whom?**

*Identify the name & address of the IRB-approved Research Repository where the biospecimens and/or information will be stored for future use, who owns the Repository, and any sponsors. Describe the purpose of the Repository and specific research topics it addresses, if any. Consistent with the Standard Operating Procedures of the Repository, explain which investigators may request specimens and/or information for research. Sample text appears below.*

The XYZ Research Repository is owned and operated by Dr. Smith, MD. The repository is at: 123 Main Street, Any City, NJ, 12345. The sponsor, who helps pay the costs of operating the Repository, is Company A.

The repository's purpose is to store [choose: biospecimens and/or information] for future research by investigators at this University and other universities in the United States. The goals of the research are to better understand [specify, e.g., Disease X] and to develop better means to [specify, e.g., prevent, diagnose, and treat Disease X].

There is no set limit to the number of individuals that may provide [biospecimens and/or information] to the repository. The more [choose: biospecimens and/or information] available, the more useful the repository will be for scientific research.

**How and what [Biospecimens and/or Information] will be collected from or about me?**

*Explain what and how biospecimens and/or information will be collected. List specimens to be collected in order of most invasive to least invasive procedure. NOTE: If the specimens and/or information were collected during the main study—and discussed in the main consent, simply state that here in a brief sentence and delete the rest of this section.*

* We will collect [specify, e.g., bone marrow, a lung biopsy, cancerous tissue] from you by [explain]; [and/or]
* We will collect a blood sample from you by drawing about [specify] of blood from a vein in your arm; [and/or]
* We will collect a urine sample from you.
* We will collect information about you [specify exactly what information you will collect. Be clear about what identifiers, if any, will be linked to the information] by [specify…e.g. looking at your medical record or asking you to complete a questionnaire, etc.]

**Insert the following after the signature lines for the main informed consent:**

**CONSENT TO STORE IDENTIFIABLE BIOSPECIMENS AND/OR INFORMATION**

**IN A RESEARCH REPOSITORY (BANK) FOR FUTURE RESEARCH**

I have read this entire consent form, or it has been read to me, and I believe that I understand what has been discussed. All of my questions about this form and this study have been answered. I agree to take part in this Research Repository.

**If options exist, add the following. If not, delete this section.**

Please tell us if and how you wish your [choose: biospecimens and/or information] to be used for future research. Please add your **Initials** to indicate the ways you permit your samples and information to be used:

* My [choose: Biospecimen and/or information] may be used for future research as follows:

\_\_\_\_\_ only on Disease [specify]

**\_\_\_\_\_** on any research topic important to researchers

Participant Name (Print):

Participant Signature: Date: