

**Participants:**

You are being asked to participate in a research study. Before you agree, you must first be provided with a summary of the research study. This summary must contain the key information to help you understand the reasons why you might or might not want to join the study.

Your participation in this research is voluntary, and you will not be penalized or lose benefits if you refuse to participate or decide to stop.

After presenting the summary, the study team will provide you with additional details about the study which must include:

1. the purposes, procedures, and duration of the research;
2. any procedures which are experimental;
3. any reasonably foreseeable risks, discomforts, and benefits of the research;
4. any potentially beneficial alternative procedures or treatments; and
5. how confidentiality will be maintained.

Where applicable, the study team must also tell you about:

1. any available compensation or medical treatment if injury occurs;
2. the possibility of unforeseeable risks;
3. circumstances when the investigator may halt your participation;
4. any added costs to you;
5. what happens if you decide to stop participating;
6. when you will be told about new findings which may affect your willingness to participate;
7. how many people will be in the study;
8. use of your biologic specimens for commercial profit;
9. whether you will be told about your research results;
10. whether the research might include whole genome sequencing; and
11. any future research use of your information or biologic specimens.

**In-Person Research Risk:**

For the safety and protection of yourself, the research team and others, we strongly recommend that you wear a well-fitting mask that covers nose and mouth [(CDC guidance)](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/types-of-masks.html) during each research-related encounter to reduce the spread of common respiratory diseases such as the Rhinovirus (common cold), the Influenza (Flu), Respiratory Syncytial Virus (RSV), and Coronavirus Disease of 2019 (COVID-19). Members of the research team will wear a well-fitting mask that covers nose and mouth at all times.

If you agree to participate, you must be given a signed copy of this document and a written summary of the research.

You may contact *(name)*at *(phone number)*       any time you have questions about the research.

You may contact the UH Human Studies Program at 808.956.5007 or [uhirb@hawaii.edu](mailto:uhirb@hawaii.edu). to discuss problems, concerns and questions, obtain information, or offer input with an informed individual who is unaffiliated with the specific research protocol. Please visit <https://research.hawaii.edu/orc/human-studies/participant-information/> for more information on your rights as a research participant.

Signing this document means that the research study, including the above information, has been described to you orally, and that you voluntarily agree to participate.

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| Signature of Research Participant | | |  | Print Name of Research Participant | |  | | Date |
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| Signature of Witness**\*** | | |  | Print Name of Witness | |  | | Date |
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| **\*****REGARDING THE USE OF AN INTERPRETER:** | | | | | | | | |
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| \_\_\_\_An interpreter, or other individual, who speaks English and the participant’s preferred language facilitated the administration of informed consent and served as a witness.The investigator obtaining consent may not also serve as the witness. | | | | | | | | |
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| \_\_\_\_An interpreter, or other individual, who speaks English and the participant’s preferred language facilitated the administration of informed consent but did not serve as a witness. The name of the person providing interpretive support is:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. | | | | | | | | |