

Columbia University Medical Center Assent Form

Attached to Protocol: IRB-AAAA3272

Principal Investigator: Robin Goland (rsg2)

IRB Protocol Title: TrialNet Type 1 Diabetes Pathways to Prevention Study

Consent Number: CF-AAAQ1125

Participation Duration: 10 yrs

Anticipated Number of Subjects: 4000

Contact

<u>Contact</u>	<u>Title</u>	<u>Contact Type</u>	<u>Numbers</u>
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Research Purpose

We want to tell you about a research study. Someone in your family has diabetes. You may have a greater chance of getting diabetes too. Diabetes makes people sick because there is not enough insulin in the body. Insulin is needed so that your body can use the food that you eat which gives you energy to run and play.

Information on Research

We would like to find out more about your risk of getting diabetes. To do this, we will need to stick your arm with a needle to do a blood test. This could sting and you could be sore or have a bruise afterwards. Sometimes we need to do the blood test a second time in order to be sure of the results. If we find that you may be at risk of getting diabetes, we will ask you and your parents if you want to continue in this research study.

We hope this research study will help us to understand how people get diabetes. The study could also help us learn more about preventing diabetes. Being in this study is your choice. You do not have to

TrialNet Natural History Study: Screening Assent Subject date of birth
Version 8-11

be in this study and if you do, you can change your mind and stop the study. The study team will not get mad at you if you do not want to be in the study.

If we find out that you are not likely to get diabetes now, you still might have a chance of getting it later. So we will ask you to come back once a year to repeat the blood test. Please ask any questions you might have.

Benefits _____

We hope this research study will help us to understand how people get diabetes. The study could also help us learn more about preventing diabetes.

Voluntary Participation _____

Being in this study is a free choice. You do not have to be in this study and if you do, you can change your mind and stop the study. No one will get mad at you if you do not want to be in the study.

Additional Information _____

If we find out that you are not likely to get diabetes now, you still might have a chance of getting it later. So we will ask you to come back once a year to repeat the blood test. Please ask any questions you might have.

If you want to be in this study, please sign your name to this paper. You and your parent(s) will be given a copy of this form after you sign it.

Signature

Study Participant

Print Name _____ Signature _____ Date _____

Person Obtaining Assent

Print Name _____ Signature _____ Date _____

