ENCLOSURE #1

UNIVERSITY OF DETROIT MERCY

INSTITUTIONAL REVIEW BOARD

PROJECT INFORMATION SUMMARY

The *Project Information Summary* is to be completed by the Principal Investigator for review by the members of the University of Detroit Mercy Institutional Review Board. Please **type** responses to numbers 1 through 6 below. This form is available, and may be filled out and printed off, on the UDM - IRB web site at: **http://www.udmercy.edu/Academics/ospra/irb.htm**. To do this you will need a copy of the free Adobe Acrobat Reader and Adobe Forms Fill-in plug-in. A link to the site where you may obtain these is available on the UDM - IRB web site.

1. **Title of Proposed Project:** _____

   _____

2. **Name and Department of Principal Investigator:**

   Name: _____

   Department: _____ Work Telephone: (___) _____

   Home Address: _____
   Street Address City State Zip

   Home Telephone: (___) _____

3. **Name of Associate Investigator(s):** _____

   _____

   _____

4. **Thesis/Dissertation or Faculty Advisor:** _____

5. **Dates of Entire Project Period:** (From) _____ (To) _____

6. **Amount of Funding and Source Thereof:** _____

7. "I/We agree to conform with all policies of the University of Detroit Mercy Institutional Review Board; to make no change affecting the rights of human subject volunteers without prior approval of the Board; when requested to do so, report to the Board on the progress of the research."

	Signature	**Date**
Principal Investigator:	_____	_____
Associate Investigator(s):	_____	_____
	_____	_____
Thesis/Dissertation or Faculty Advisor:	_____	_____

NOTE: Changes in Federal mandates pertaining to research involving human subjects necessitate special care in completing these forms, especially the Informed Consent Form.

1. Title and Objectives of Proposed Project:

2. Brief Description of Research Plan:

3. Listing of number of volunteers involved and the type of volunteer (age, sex, disease entity, etc.), and describe how the volunteers were recruited (see *Advertising for Study Volunteers* handout):

4. Listing of possible benefits which might accrue to the volunteers, or to others, as a result of their participation in the project:

5. Listing of possible risks to the volunteers which might occur as a result of the volunteers participation in the project:

6. Listing of all invasive procedures to be performed on the volunteer:

7. Listing of all medications, or chemical materials, and all appliances and devices, which will be in direct contact with the volunteer in the course of this study:

8. List all physical and/or medical tests to be performed on the volunteer.

9. List all questionnaires to be answered as a part of this research (attach a copy of each):

10. Describe how volunteers will be informed of possible benefits and/or risks (attach copy of *Informed Consent Form*):

11. Describe how the confidentiality of the volunteers will be protected:

12. Is a full copy (not merely a tentative draft) of the Informed Consent Form (including a signature page) included here? If not, indicate why:

13. Other information investigator deems appropriate (e.g. description of monetary or other incentives planned. When volunteers are paid for their participation, the payment should accrue as the study progresses and not be contingent upon completion of the study).