**Department of Veterans Affairs Informed Consent Addendum**

Name of Study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As a VA subject participant, you are also being provided additional information about what is placed in your medical record:

Who will See My Medical Information?

Information has been provided to you that the study doctors have a privacy permit. This privacy permit is called a Certificate of Confidentiality. In addition to help protecting your study records if there is a court case, the Certificate of Confidentiality also does not allow researchers to release research information identifying you to other people not connected with the study unless you allow it except in a few situations, such as if is required by law. However, your study doctors will put information about your participation in this study in your VA medical record for your safety. It is important for other health care providers taking care of you to know any study drugs or study treatments you are receiving.

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Participant’s signature

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Date of signature

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Signature of person(s) conducting the informed consent discussion

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Date of signature