

The University of Oklahoma
Health Sciences Center
OFFICE OF HUMAN RESEARCH PARTICIPANT PROTECTION

WRITTEN ATTESTATION

I attest that I am familiar with the requirements of human research subject protections, including informed consent, in particular with the Code of Federal Regulations Title 45, Part 46 - Protection of Human Subjects and Title 21, Chapter 1, Part 50 - Protection of Human Subjects. In addition, if I am working with an Investigational New Drug, Biological Product, or Investigational Device, I am familiar with the Code of Federal Regulations Title 21, Chapter 1, Part 312 - Investigational New Drug Applications, Part 600 - Biological Products, and Part 812 - Investigational Device Exemptions.

I will conduct all research involving human subjects in accordance with the terms and conditions of these regulations and with University of Oklahoma policies.

I also am familiar with the Code of Federal Regulations Title 21, Part 54 - Financial Disclosure by Clinical Investigators and will make appropriate disclosures as required by the regulations or by the Institutional Review Board.

I will abide by all human research protection education requirements.

I acknowledge that I have received copies of the regulations, have attended training, and am aware that I can obtain additional information and updates at the following websites:

1. Office for Human Research Protections (OHRP), DHHS
<http://ohrp.osophs.dhhs.gov>
2. Food and Drug Administration (FDA)
<http://www.fda.gov>
3. NIH Office of Human Subjects Research (OHSR)
<http://ohsr.od.nih.gov>

Name: _____

Signature: _____

Date: _____