COLUMBIA UNIVERSITY/COLUMBIA UNIVERSITY MEDICAL CENTER IRB AUDIO/VIDEOTAPE ADDENDUM TO CONSENT FORM (SAMPLE)

(This form is provided to the investigator as a guide. Instructions and sample language are denoted in boldfaced italics within the brackets []).

You have already agreed to participate in a research study entitled: [*Insert Study Title*] conducted by [*Insert Principal Investigator*]. We are asking for your permission to allow us to [*include optional procedure such as audiotape (sound), videotape (picture), or both audio and videotape*] as part of that research study. You do not have to agree to be recorded in order to participate in the main part of the study.

The recording(s) will be used for [include purpose of recording; e.g., sample language may include: analysis by the research team; possible use as a teaching tool to those who are not members of the research staff (i.e. for educational purposes); commercial purposes. If the tapes will be used for commercial purposes, the consent must specifically state whether or not the subject would be compensated for this use.]

The recording(s) will include [indicate whether the subjects name or any other identifier will be recorded. If videotaping will be utilized, indicate the extent to which subject's identity would be masked (e.g., Facial features partially blocked out; recording will not include facial pictures; recording will include full facial pictures.)]

The recording(s) will be stored [include measures taken to protect subjects privacy. For example: in a locked file cabinet with no link to subjects' identity; in a locked file cabinet and linked with a code to subjects' identity; in a locked file cabinet and labeled with subjects' name or other identifiable information] and will be [indicate the length of time the recording(s) will be retained, e.g. destroyed upon completion of the study procedures; destroyed upon publication of study results; retained indefinitely.]

Your signature on this form grants the investigator named above permission to record you as described above during participation in the above-referenced study. The investigator will not use the recording(s) for any other reason than that/those stated in the consent form without your written permission.

[Signature block, which should reflect the signature block on the main consent form for the study.]