APPENDIX G2. WESTAT IRB APPROVAL LETTER



An Employee Owned Research Corporation 1500 Research Boulevard Rockville, MD 20650-0129 tel: 301-251-1500 fax: 301-254-2040 www.westat.com

AMENDMENT REVIEW FORM

(TO ADD OR CHANGE PREVIOUSLY APPROVED RESEARCH)

All changes or new activities for previously approved studies require submission, review, and approval of an Amendment Review Form. Please complete and submit this form to irb@westat.com and attach all necessary materials to be reviewed. Once the request has been reviewed, you will be contacted. If this change or new activity requires a full Board review, those meetings occur on the second Tuesday of every month. To check the date of meetings, please see the meetings.chedule under IRB in WesInfo. Thank you for your cooperation.

1.	Today's Date:	04 / 16 / 2012					
	Date of Original Approval:	01/00/2012					
	Project Name:	FRMS N Farmers					
	Westat Project Number:	8876.02.00					
	Agency Grant or Contract Number:	AG-3198	8-B-10				
	Project Director:	Mustafa Karakus			Ext. 2874		
	Unit Ops Number/Study Area:	1.21.76-	Healt	h Studies/NCS			
	Area IRB Representative:	Karen Della Torre			Ext. 2832		
2.	Indicate the type of addition or change (SELECT ALL THAT APPLY.) Name(s) of investigators Project number Introduction of a new IRB or request Westat to serve as the IRB Study design, survey questionnaire, of procedure(s) Informed consent process, consent ff parent permission(s), or assent form(secretary parent permission of the parent perm	or request for onnaire, or consent form(s), sent form(s) rategies		Review of final instrument su questions or data collection si previously approved study Mode of administration of in- study (e.g., from mail or telep Internet access) Data access rights Any other change in protocol treatment of human subjects: (PLEASE SPECIFY)	d study. uch as interview sites for a astruments in your phone to web or		

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Am	endr	ment Res	new Form				Submit materi	ials by em	ail: IRB@w	stat eom	
	Please provide a brief summary of your change or addition to previously approved research.										
	This is the addition of new materials. The original approval was for cognitive testing of the questionnaire. This amendment is for the full study and includes letters, questionnaires, refusal conversion text, and focus group materials that were not seen previously.										
4.		ow does each change or addition affect the risks to participants in your study? (SELECT ONLY ONE.) No change									
			/A – no ris	ks							
	C.	_ D	ecreases the	e risk (<i>SPECIF</i>	FY):						
	d.	_ In	creases the	risk (SPECIF	y):						
	e.	☐ Ac	ids a new r	is k (<i>SPECIFY</i>)):						
FOR HARD-COPY SUBMISSION, PLEASE SIGN HERE: A signature is not required when you return this form electronically; however, please fill in the date of completion. The information provided in this request form is complete and correct.											
Project Director/ Principal Investigator: Date				Date:	04 / 16/ 2012						
Please attach: One document that clearly identifies (through track changes, highlights, or italics) the revision in the previously approved submission. Another document labeled "corrected version."											
Ify	ou h	nave any	questions,	feel free to o	contact Sharor	n Zack, the II	RB Administrato	r, at x88	28.		
	IRB Administration Use Only Expedited review and approval for the modification(s) on this form:										
			And the second s	eretistament	_						
			IRB Cha	air / Associa	ate Chair / De	esignee					
				Office Only	NEXT CONTINU	IING REVIEW D	ATE: 01 / 00/ 20	13			

CONDITIONAL APPROVAL (PLEASE SEE ATTACHED LETTER)

☐ DID NOT QUALIFY FOR EXPEDITED REVIEW