COMMITTEE ON THE PROTECTION OF HUMAN SUBJECTS DEPARTMENTAL (UNIT) REVIEW FORM CALIFORNIA STATE UNIVERSITY, FRESNO

Please type.		
Principal InvestigatorName	Dept.	Mail Stop
	Office Telephone	Secretary Telephone
If student or collaborative research: Name		Affiliation
TITLE OF STUDY	Telephone	Telephone
If funding is sought, from what agency?		
How did the Principal Investigator designate the research?	Minimal risk _	At risk
REVIEWER 1 Name At risk Minimal risk		Place your signature in the category of your judgment
COMMENTS:	1.4.4.4	□ APPROVED
		DISAPPROVED
REVIEWER 2 Name At risk Minimal risk		Place your signature in the category of your judgment APPROVED DISAPPROVED
REVIEWER 3 Name At risk Minimal risk COMMENTS:		Place your signature in the category of your judgment APPROVED DISAPPROVED

The department may wish to route this form to the 3 reviewers or send each reviewer a form. If the review is done on three separate forms, the Chair ought to give each reviewer the comments of the other reviewers as well as the Principal Investigator. If all three reviewers judge the proposal as "minimal risk," the Department Chair notifies the Principal Investigator and keeps this form(s) for 5 years. If funding is sought for this study or it is "at risk", 8 copies of the protocol and this form are forwarded to the university CPHS with one additional copy to the dean's office. (See sections 3.7 and 3.8)

Application Form for

UNFUNDED RESEARCH—CSUF COMMITTEE ON THE PROTECTION OF HUMAN SUBJECTS

	PAL INVESTIGATOR Name	Dept.	Mail Stop
		Office Telephone	Secretary Telephone
Student	's name or collaborator(s)	collaborative research)	PIR-14-14
	(in approach of a greatest solder thosas, do indicate) (allimation in	compositive research)	
		Telephone	Telephone
TITLE .			
ndicate	ncipal Investigator is responsible for fully understanding your judgment as Principal Investigator as to the RISK of this sheet.) (If exempt see 3.52)	ng the <i>Policy and Procedu</i> C category of the present stud	uros of the CPHS. Below dy. (See definitions on the
	Minimal Risk	At Risk	
	PROCEDURES	PROCE	DURES
	 Attach your protocol and submit to your department chair for review by your human subjects committee. 		r review by your human . (A sample informed
	 Your departmental committee will review the protocol status and if it agrees with the determination of "minimal risk" status (see Appendix 5.3), then 	Submit the department of this form to the CPF	nent review form(s) with
	Your department chair will keep the forms for 5 years.	Transmit all reviews copies) to the CPHS additional copy to the copy to t	S for review. Send one
	4. Your responsibilities have been satisfied.	Allow two weeks du your response from	
	HOWEVER. (If the department review changes the determination to "At Risk," follow the procedure to the right of this page.)		

"Exempt" Research

If "exempt' see Section 3.5.2.

"Minimal Risk"

Research IN WHICH THE RISKS OF HARM ANTICIPATED ARE NOT GREATER, CONSIDERING PROBABILITY AND MAGNITUDE, THAN THOSE ORDINARILY ENOUNTERED IN DAILY LIFE OR DURING THE PERFORMANCE OF ROUTINE PHYSICAL OR PSYCHOLOGICAL EXAMINATIONS OR TESTS.

No research involving any item listed as being "at risk" can be determined to be minimal risk A department or other unit review committee may determine that a research proposal submitted, in the judgment of the principal investigator as "minimal risk." is actually "AT RISK"

"At Risk" Research.

"A subject is considered to be 'at risk' if he/she is exposed to the possibility of harm-physical, psychological, sociological, or other as a consequence of any activity which goes beyond the application of those established and accepted methods necessary to meet his/her needs. The determination of when an individual is 'at risk' is a matter of the application of sound professional judgment of the circumstances of the activity in question and the ethical principles contained herein. Responsibility for this determination resides at all levels of institutional and departmental review'. (The Institutional Guide to DHEW Policy on Protection of Human Subjects, Washington, D.C., 1971, p2.)

An illustrative, but not inclusive, list of "at risk" procedures would include experiments involving any aspect, degree, quality, or amount of any of the following:

Deception, mental stress, including subjection to public embarrassment, humiliation, discomfort, irritation, or harassment, hypnosis, sensory deprivation, sleep deprivation, normally ingested or inhaled materials in excess or less than normal amounts, injection, ingestion or inhalation of toxic materials, including all drugs, alcohol or placebos; strenuous physical exertion; use of physical stimuli in abnormal amounts (e.g., noise, vibration, shock, heat, magnetic fields, radiation); violation of anonymity or confidentiality of subjects and data; OBSERVATIONS RECOREDED ABOUT THE INDIVIDUAL WHICH, IF THEY BECAME KNOWN OUTSIDE THE RESEARCH, COULD MAKE THE SUBJECT LIABLE TO CRIMINAL OR CIVIL ACTION OR DAMAGE THE SUBJECT'S FINANCIAL OR EMPLOYMENT STATUS; OR ABROGATION OF ANY CIVIL RIGHT

California State University, Fresno

To: Principal Investigators
Department of Psychology

From: Human Subjects Committee

Re: Informed Consent for subjects in research

There are three (3) categories of research with human subjects.

"AT RISK" RESEARCH

"MINIMAL RISK" RESEARCH

"EXEMPT" RESEARCH

There is also a special procedure for Federally funded research.

All research with human subjects must be approved at some level. Usually the Departmental Review is enough. However, different procedures are required for each category.

Please consult the Policy and Procedures document of the University Committee on the Protection of Human Subjects, available from the Psychology Department office or the Vice President's office (ext. 8-2083).

The attached form may be used for subjects in "MINIMAL RISK" research.

For information regarding protocols and informed consent where subjects are "AT RISK", please consult the Procedures document, especially Appendix 5.1 and 54.

INFORMED CONSENT

MINIMAL RISK RESEARCH

I agree to participate in the following study:
The principle investigator of this study is:
The purpose(s) of this study is/are:
I understand the procedures to be as follows:
I understand the risks of harm or discomfort from these procedures are not greater than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.
The potential risk and discomforts, if any, may be:
The benefits to me and to others may be:
I understand that any information obtained in connection with this study