VA Consent Document

STUDY SUMMARY

You are being asked to take part in a research study. Before you consider the research, the most important information is summarized. It is important for you to understand why the research is being done and what it will involve. Following the summary, you will be given more detailed information.

- Participation in this research is voluntary. You do not have to be in the study.
- The purpose of the study is to text whether an investigational drug will reduce suicidal ideation in veterans. The investigational drug is not approved by the U.S. Food and Drug Administration (FDA).
- A group will take the study drug and the other group will take placebo. A placebo looks like the pill that contains the study drug but does not contain drugs or active ingredients.
- The study will involve taking either placebo or the study drug, physical examinations, questionnaires and MRI/MRS brain scans. The procedures will be explained in detail later in this consent. Your participation in the study will last about 6 weeks. Study visits will range from 1.5 to 4 hours long.
- There are potential risks from taking the study drug. There are also risks associated with taking the placebo including the risk of your condition worsening. There are also minor risks from blood draws and brain scans. All the risks will be explained in detail later in the consent. There are also potential risks if you were to become pregnant or to father a child. Those risks will also be explained in detail later in the consent.
- There may not be any direct benefit to you for participating in this study. Potential benefits to you or others will be explained later in this consent document.
- If you decide not to take part in the study, you have other options such as continuing with your current treatment plan, or talking with a VA clinician about different treatments for suicidal ideation.

Please take time to read the following information carefully and discuss it with friends, relatives and health care professionals, if you wish. Ask the research doctor or staff if there is anything that is not clear, or if you would like more information. Take time to decide whether or not to volunteer to take part in this research study.

BACKGROUND AND PURPOSE

You are being asked to take part in the study because you are between 18-55 years old and have suicidal ideation. Before any study medication is prescribed to you, a thorough assessment will be performed. If the assessment results show that you do not have suicidal ideation, or that in the past 12 months you have not either made a suicide attempt, or been hospitalized with suicidal ideation, or had a significant negative impact on your life due to suicidal ideation, your participation in the study will stop.

Commented [UUIRB1]: Informed consent should begin with a **concise and focused presentation of the key information** that is most likely to facilitate understanding of the reasons why one may or may not want to participate in research.

In general, the beginning of an informed consent would include a concise explanation of the following: 1) The fact that consent is being sought for research, and participation is voluntary; 2) Purpose of the research, expected duration, and procedures; 3) Reasonably foreseeable risks; 4) Benefits that may be reasonably expected; 5) Appropriate alternative procedures or courses of treatment, if any.

This concise summary includes all the summarized information. The more comprehensive and detailed information follows the summary in the body of the consent.

Commented [UUIRB2]: Is there a statement that the study involves research? Yes.

The purpose of the study is to learn if the investigational drug uridine reduces suicidal ideation in veterans, when compared to a group taking a placebo. Uridine is a naturally occurring chemical in the body, that is made by the human liver. Uridine is part of a family of compounds called pyrimidines and is involved in several important processes in the human body, such as energy metabolism and protein synthesis.

Commented [UUIRB3]: Is there an explanation of the purposes of the research? Yes.

Uridine supplementation is considered experimental because uridine has not been approved by the United States Food and Drug Administration (FDA) to treat suicidal ideation. The uridine we use in this study is manufactured by a company called Natural Pharmacia International, Inc. located in Burlington, Massachusetts. The study will use standard methods to assess your mood and suicidal ideation, such as rating scales and questionnaires. In addition, the study will use Magnetic Resonance Imaging and Magnetic Resonance Spectroscopy (MRI/MRS) brain scans, to see if levels of certain chemicals change in participants who are taking uridine. The scans use a magnet to acquire images of the brain and measure brain chemistry, and will not expose you to ionizing radiation.

Uridine has been studied in animal models of depression, and has an antidepressant-like effect in rats. Uridine has also been tested in human studies of healthy adults, and also patients with bipolar disorder. A Phase 1 study of uridine with healthy adults resulted in no deaths or abnormal laboratory results. A Phase 2 study of adults with bipolar disorder found that uridine reduced the depression symptoms of bipolar disorder. In research studies of adolescents with bipolar disorder, uridine reduced depression symptoms and suicidal thoughts.

Uridine is FDA approved and sold in the United States, as a treatment for two medical conditions. One of the conditions is Hereditary Orotic Aciduria, for which patients receive uridine in oral doses of 60-120 milligrams per kilogram of body weight (mg/kg) daily. Patients with Hereditary Orotic Aciduria have been safely treated with uridine as young as 3 months of age. Some patients with Hereditary Orotic Aciduria have been treated with uridine for over 20 years, at doses of up to 150 mg/kg daily. When taken at that dose by patients with Hereditary Orotic Aciduria, the side effects of oral uridine include diarrhea and stomach cramps. Uridine has not, to our knowledge, been associated with serious side effects such as organ failure or death. Uridine is also FDA approved to treat the life-threatening side effects, or accidental overdose, of certain cancer chemotherapy drugs. The uridine dose for cancer chemotherapy patients is 10,000 mg by mouth every 6 hours (40,000 mg per 24 hours) for 5 days or 20 doses. In addition, in the past patients receiving certain types of cancer chemotherapy were treated with uridine intravenously (IV). These patients experienced side effects including irritation at the IV site and shivering, but did not have stomach cramps or diarrhea. In another study, patients with diabetic neuropathy were treated with oral uridine 900 mg daily for 6 months, with side effects that were not different from patients treated with inactive placebo.

This study is being conducted by the United States Department of Veteran Affairs (VA).

STUDY PROCEDURES

This section is designed to explain what you will be required to do, undergo and experience if you decide to take part in this study.

Commented [UUIRB4]: Is there a description of the procedures to be followed including the identification of any procedures that are experimental? Yes.

The research study you have been asked to take part in will last 6 weeks. It is a randomized, double-blind, placebo-controlled trial of uridine. A research trial usually involves comparing different treatments. In a trial, one group will get one treatment and another group will get a different treatment. In a "randomized trial," people are put in one treatment group or the other by random chance. This means that a computer will decide by chance which group a participant is in, not the doctors running the trial. In this "double blind" trial, neither you nor your doctor will know which treatment group you are in (although, if your doctor needs to find out for important medical reasons, he or she can do so through the Salt Lake City VA Research Pharmacy). All participants in this study will have a 50-50 chance of being randomly assigned to receive 2,000 mg of uridine or placebo daily. A "placebo" is a dummy treatment such as a pill, which looks like the pill that contains the study drug but is not. Placebos contain no drugs or active ingredients. Study participants are given placebos so that the effects of a drug can be compared against the effects of no drug. Use of placebos also prevents the research participant and the study doctors from knowing whether or not the participant is getting the drug.

Commented [UUIRB5]: For studies involving placebo or withheld treatment, the informed consent process should include:
1.The reason for the placebo or withheld treatment must be explained;
2."Placebo" should be defined in lay terms;
3.Any withheld treatment must be detailed;
4.If applicable, describe any plan for rescue therapy, special monitoring, or crossover to placebo;
5.For studies involving placebo or withheld treatment, potential risks must be adequately explained, including any risks of non-treatment.

If you decide to take part in this research study, your assessments show that you have suicidal ideation, and your medical exam and laboratory results are either within normal limits or not clinically significant, here is what will happen throughout the rest of the study:

First visit: Medical Screening and Eligibility Determination (~4 hours)

At this visit, the study team determines if you qualify to join the study. At the screening visit, you will be evaluated to determine your psychiatric diagnosis, whether you have suicidal ideation and how severe it is, and your current physical symptoms and medication side effects. The following will take place during the screening visit:

1. We will fill out rating scales and forms, where we ask you questions about your illness, health, medications, and family history.
2. We will ask you questions from questionnaires about your mood, suicidal thoughts and actions. You will also fill out similar questionnaires on your own.
3. We will give you a physical exam (for example, listen to your heart and lungs). We measure your weight and vital signs, including blood pressure and heart rate.
4. We will write down all the medications you are taking, including vitamins and over-the-counter remedies. You will continue to take these medications and over-the-counter remedies throughout the course of the study, and you will not have to stop any of your current treatments.
5. If you do not have suicidal ideation, together with a suicide attempt, one or more hospitalizations to prevent a suicide attempt, or functional impairment due to suicidal ideation during the past 12 months, you will not be eligible to enroll in the study. The study doctor will summarize the evaluation's results for you.

Baseline Visit: First MRI/MRS Brain Scan (~3.5 hours)

Before the first brain scan visit, we will ask you to have your blood drawn at the VA. This can take place anytime before the first brain scan. The VA laboratory will draw about 2 tablespoons of blood for basic laboratory tests.

1. We will measure your weight and take vital signs, including blood pressure and heart rate.
2. We will ask about any physical symptoms, or medication side effects you are having.
3. We will ask you questions from questionnaires about your mood, suicidal thoughts and impulses, and, on your own, you will fill out similar questionnaires.
4. We will collect a urine sample for a urine drug test, and urine pregnancy test (for females).
5. You will have your first MRI/MRS brain scan, which may last up to 90 minutes.
6. You will receive your study medication. The dose of uridine or placebo is 2,000 mg per day by mouth.

Week 1 Visit: Second MRI/MRS Brain Scan (~3.5 hours)

1. We will measure your weight and take vital signs, including blood pressure and heart rate.
2. We will ask about any physical symptoms, or medication side effects you are having.
3. We will ask you questions from questionnaires about your mood, suicidal thoughts and impulses, and, on your own, you will fill out similar questionnaires.
4. We will collect a urine sample for a urine drug test, and urine pregnancy test (for females).
5. You will have the second MRI/MRS brain scan, which may last up to 90 minutes.
6. We will count the leftover study medication, and provide new medication.

Week 2, 3, and 4: Treatment Visits (~1.5 hours)

1. We will measure your weight and take vital signs, including blood pressure and heart rate.
2. We will ask about any physical symptoms, or medication side effects you are having.
3. We will ask you questions from questionnaires about your mood, suicidal thoughts and impulses, and, on your own, you will fill out similar questionnaires.
4. We will count the leftover study medication, and provide new medication at the Week 2 and Week 3 visits. At the Week 4 visit, we collect the leftover study medication. The clinical trial lasts 4 weeks, so no new medication will be provided at the Week 4 visit.

Week 5: Follow-Up Safety Visit (~1.5 hours)

This visit happens one week after you have stopped taking study medication. We will ask you to have your blood drawn at the VA, before the Week 5 follow-up visit. The VA laboratory will draw about 2 tablespoons of blood for basic laboratory tests.

1. We will measure your weight and take vital signs, including blood pressure and heart rate.
2. We will ask about any physical symptoms, or medication side effects you are having.
3. We will ask you questions from questionnaires about your mood, suicidal thoughts and impulses, and, on your own, you will fill out similar questionnaires.
4. We will summarize your participation in the study, and discuss plans for ongoing clinical care at the VA.

The MRI and MRS Brain Imaging Procedures

You will have two study visits during which MRI/MRS brain scans are performed. These scans provide pictures the brain, and measure levels of certain brain chemicals. The scans do not cause pain, and do not use radiation. The MRI scanner looks like a large cylinder with a tube in the middle. You will be asked to lie down on your back on a foam-padded table and put your head into a special holder. The table slides inside the "tube" of the scanner. Soft, foam rubber sponges may be placed on both of your sides and under your head for comfort. The foam will also help keep your head still. It is important that you keep your head as still as possible. Because the scanner contains a strong magnet, you will need to remove all metal objects from your body. This includes: watches, rings, necklaces, bracelets, earrings, body piercings, belts, coins, and wallets (with credit cards). Some items of clothing contain metal (like shirt or pants zippers, or shoelace eyelets) and must be removed. These items will be locked in a safe place until the scan is over. Otherwise, you can stay in your street clothes.

You will hear different sounds during the MRI/MRS scans. These sounds can be loud, and the sounds change depending on the type of picture that is being taken. Some examples of sounds you may hear are: like a hammer hitting a piece of wood, like an electric saw, loud beeping or clicking, or buzzing noises. These sounds may be repeated several times during the scan, and are part of the normal function of the scanner.

You will be in the scanner for a total of up to 90 minutes.

RISKS

There are certain risks that could occur due to study participation. For example:

Commented [UUIRB6]: Is there a description of any foreseeable risks or discomforts to the participant? Yes. Although mentioned in the concise summary, this detailed and comprehensive list of potential risks is provided.

- During the initial diagnostic interview, you may become emotionally upset when asked about your psychiatric history, including suicide attempts, self-injurious behavior, and past traumatic events including military combat experience, and your history of physical or sexual abuse.
- You may experience discomfort or bruising when blood is drawn for laboratory tests. Very rarely, a mild infection can result from having your blood drawn.
- You have a 50% chance of being assigned to placebo. This means that you would not receive uridine during the 4-week randomized clinical trial period.
- It is possible that your condition could worsen during the study. This could be unrelated, or related, to study participation. Veterans with suicidal ideation are at-risk for depression symptoms, psychotic

symptoms, self-injurious behavior, aggression, substance use symptoms, worsening suicidal ideation, psychiatric hospitalization, attempted suicide, and completed suicide as part of their condition. Study psychiatrists are available 24 hours per day, 365 days per year, including all weekends and holidays. If your condition worsens to the point that you present an imminent suicidal or homicidal danger to yourself or to others, you will be hospitalized to maintain your safety. If you are hospitalized, we will be withdrawn from the study.

- It is possible that treatment with uridine will not be effective as a treatment for veterans with suicidal ideation, and that study participation could therefore delay the start of effective treatment, if you have schizophrenia or schizoaffective disorder. This is because there is one drug (clozapine), that is FDA approved for reducing suicidal behavior in patients with schizophrenia or schizoaffective disorder. If your diagnostic assessment results show that you have schizophrenia or schizoaffective disorder, the study doctor will inform you that clozapine is a treatment option that you can discuss with your regular doctor. It is VA policy that VA patients with schizophrenia or schizoaffective disorder who have experienced failures on two or more antipsychotic medications, are given the option of treatment with clozapine.
- Some participants may experience stomach upset and/or diarrhea, as a result of taking the study medication. Therefore, we recommend taking the medication with food to reduce possible side effects.
- Uracil is a nucleotide base found in ribonucleic acid (RNA). RNA is involved in coding, decoding, regulation, and expression of genes to synthesize proteins. In animal research, some rats fed uracil developed urinary bladder cancer, due to irritation from bladder stones that were found to be made of uracil. Uracil can be produced in humans who are given high doses of uridine. To our knowledge, no uridine research study with human beings has found that participants developed either uracil bladder stones, or bladder cancer.
- The research team will take precautions to safeguard your confidentiality, but it is possible that a breach of confidentiality could occur.
- Our MRI/MRS scans do not use ionizing radiation like x-rays or computed tomography (CT) scans. Instead, magnetic fields and radio waves are used to take pictures and measure brain chemistry. There are no known risks related to MRI scans, other than the risk of injury if metallic objects are brought into the scanning room by mistake. You can be seriously injured during an MRI/MRS scan to, if you have any of these:
    - Cardiac (heart) pacemakers
    - Metal clips on blood vessels, or stents inside of blood vessels
    - Artificial heart valves
    - Artificial arms, hands, legs, etc.
    - Brain stimulation devices
    - Implantable drug pumps
    - Cochlear (ear) implants

- Ocular (eye) implants, or metal fragments in the eyes
- Exposure to shrapnel or metal fillings
- Other metallic surgical parts or implants
- Orthodontic braces on the teeth
- Body jewelry or piercings that cannot be removed for the scan
- Certain tattoos with metallic ink
- Transdermal (skin) drug delivery patches. Examples include: NicoDerm (nicotine for tobacco dependence), Transderm Scop (scopolamine for motion sickness), and/or OrthoEvra (birth control)

If you have any such items, you cannot have an MRI/MRS scan before being cleared by a research physician.

- Serious risks also exist if any ferromagnetic objects (things that stick to magnets) are brought into the scanner area. Ferromagnetic items become dangerous flying objects, and are not allowed near the scanner.
- The FDA has approved the 3 Tesla MRI scanner we use for this study, for performing routine scans in clinical care. The FDA has also decided that MRI scanners with a magnetic field strength of 8 Tesla or less do not pose significant risks to human beings. Although the scans done in this study have no known risks, there could be ill effects that are delayed, that have not yet been recognized by the FDA. The MRI/MRS scans do not cause pain. Apart from the scanner noise, you will not know the scan is taking place. Ear protection will be provided.
- Inside the scanner, some people experience claustrophobic anxiety (a fear of being in small spaces), dizziness, headaches, or a metallic taste in the mouth. You may feel cramped inside the scanner. There is a mirror placed inside the scanner so that your can see your face, or look out into the scanner room. The MRI technologist will give you a squeeze ball alarm for emergencies, and there is an intercom inside the MRI scanner so you can talk to the research team during the scan, if you experience discomfort.
- Very rarely, someone having a MRI/MRS scan feels tingling in their back, arms or legs. This is due to the magnetic field changing quickly during the scan. If you feel tingling during the scan, you should let us know right away so that the scan settings can be changed. However, the tingling does not mean that the MRI scanner is causing tissue damage, or medical harm.
- Very rarely, some people experience double vision, or see flashing lights during MRI/MRS scans. These symptoms are temporary, and will stop when you leave the scanner. Similar to the tingling described above, these visual symptoms do not mean that something is wrong, or that the scanner is causing you harm.
- The sounds made by the scanner can be loud or annoying, but the sounds are not harmful to your hearing. You will be given earplugs or headphones to muffle the noise.

- The researchers will take precautions to avoid all the known risks of MRI/MRS scans. You can request to stop the scan at any time, by squeezing the alarm the MRI technologist will give you.
- If new information about uridine, or about MRI/MRS scanning, is announced during the study, a study physician will contact you to discuss the information. New information could affect your decision to take part in this research, and the study doctor will ask if you want to withdraw from the study.

UNFORESEEABLE RISKS

In addition to the risks listed above, you could experience a previously unknown risk or side effects.

Commented [UUIRB7]: Is there a statement that the treatment or procedure may involve risks to the participant that are currently unforeseeable? Yes.

REPRODUCTIVE RISKS

While there are no known risks to unborn children, the safety of MRI for pregnant women and nursing mothers has not been established. You must have a negative pregnancy test prior to an MRI/MRS scan. Nursing mothers are not eligible to participate in the study.

Commented [UUIRB8]: For studies involving possible reproductive risks, participants should be informed of any known risks in pregnancy, either to the mother or child. For clinical trials adhering to GCP, risks to an embryo, fetus, or nursing infant must also be explained, as applicable. Acceptable methods of birth control that may be used during the research should be described. Finally, the informed consent should include a description of what action will occur in the event of pregnancy (i.e., follow-up of pregnancy outcome, immediate withdrawal from the study, etc.).

Although uridine is known to be present in the human body, and in human mother's breast milk as well as commercial infant formula, the effect of uridine supplementation on a developing fetus is unknown. Because of this, you should not become pregnant or father a child while participating in the study. The most effective way to prevent pregnancy is to abstain from sexual activity. Another reliable way to prevent pregnancy, is for you and your partner to use 2 contraceptive methods simultaneously. These methods include: condoms, spermicidal gel or foam, vaginal diaphragms, cervical caps, intrauterine devices (IUDs), contraceptive injections (Depo-Provera), birth control implants (Implanon or Nexplanon), and oral contraceptives (birth control pills).

If you become pregnant while taking part in the study, you should immediately inform the research team. Because the effects of uridine supplementation on a developing fetus are unknown, you will be withdrawn from the study. A study physician will discuss your options with you, and you will be referred for prenatal care.

BENEFITS

We cannot promise any benefits to you from being in the study. We do not know how oral uridine will work as a treatment for veterans with suicidal ideation.

Commented [UUIRB9]: Is there a description of any benefits to the participants or others? Yes.

There are possible indirect benefits to this research:

- Results from the study may help doctors understand how uridine affects individuals with suicidal ideation. This could help improve or develop treatments for suicidal ideation in the future. However, this would not directly benefit you.
- The MRI/MRS brain scans could improve our understanding of how suicidal ideation affects human brain chemistry. This could help develop or improve treatments for suicidal ideation in the future. However, this would not directly benefit you.

ALTERNATIVE PROCEDURES

You may choose to not to participate in this study. If you decide not to take part in the study, there are other choices available to you. These include continuing with your current treatment plan, or talking with a VA clinician about different treatments for suicidal ideation. As discussed above, if you have schizophrenia or schizoaffective disorder, there is one drug with FDA approval for reducing suicidal behaviors: clozapine. The research physician will inform you, if clozapine is an alternative to study participation for you, because the study assessment results show that you have schizophrenia or schizoaffective disorder.

Commented [UUIRB10]: Is there a disclosure of any alternative procedures or courses of treatment? Yes.

CONFIDENTIALITY

Results of this study may be published, but your identity will not appear in any publications. The researchers will keep all research records that identify you private to the extent allowed by law. Records about you will be kept in locked filing cabinets, in offices that only the research staff has access to. Study records will be kept in a secure manner, and electronic records will be password protected on encrypted computers. Only people working on the study will have access to your research information. We will do everything we can to keep the study records private, but cannot guarantee this.

Commented [UUIRB11]: Note: This study uses protected health information. For this study, the VA Authorization for Use & Release of Health Information will be used. It is a separate document that should be signed by the participant.

Commented [UUIRB12]: Is there a statement describing the confidentiality of records? Yes.

Your information collected in this study will not be used for future research studies.

Commented [UUIRB13]: Is there a statement about the collection of identifiable private information or identifiable biospecimens? Yes.

We will do everything we can to keep others from learning about your participation in the research. To help us protect your privacy, we have obtained a Certificate of Confidentiality from the United States Food and Drug Administration (FDA). The researchers can use this Certificate to legally refuse to disclose information that may identify you in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings, for example, if there is a court subpoena. The researchers will use the Certificate to resist any demands for information that would identify you, except as explained below.

Commented [UUIRB14]: If a Certificate of Confidentiality has been granted from the NIH or another HHS agency (including FDA), a clear explanation should be included. The explanation should explain the protection that the Certificate of Confidentiality affords, including the limitations and exceptions.

If you disclose information that gives study staff a reason to believe that a child or disabled or elderly adult has been subjected to abuse or neglect, study staff will report that information to Child Protective Services, Adult Protective Services, or the nearest law enforcement agency to the extent required by law.

Commented [UUIRB15]: The following language should be used verbatim if your study involves the possibility of disclosure of abusive situations.

The University of Utah's Institutional Review Board (IRB) is responsible for making sure that researchers follow United States federal laws protecting human subjects who are participating in research studies. Staff from the IRB or the VA may look at any research records, to make sure the research staff is following the laws that protect you. Representatives from the FDA or [Drug manufacturer] may also inspect the research records that identify you.

This clinical trial is a multi-site study. This means that the research is being conducted at both the VA Salt Lake City Medical Center, and the University of Utah. Therefore, VA data and non-VA data collected at the University of Utah will be combined and analyzed at the VA Salt Lake City Medical Center, where the study's data will be stored.

A description of this clinical trial will be available on http://www.ClinicalTrials.gov, as required by United States Law. This Web site will not include information that can identify you. At most, the Web site will include a summary of the results. You can search this Web site at any time.

Commented [UUIRB16]: For applicable clinical trials, a statement should be provided to each clinical trial participant notifying the participants that clinical trial information has been or will be submitted for inclusion in the clinical trial registry (www.ClinicalTrials.gov).

PERSON TO CONTACT

If you have questions, complaints or concerns about this study, or if you think you may have been injured from being in this study, you can contact [PI Name] on his mobile phone at [phone number]. This number is connected to a confidential voicemail that can only be accessed by [PI Name]. You may also call the University Neuropsychiatric Institute (UNI) 24 hours per day at 801-583-2500. The switchboard staff can locate and contact [PI Name] at any time. You can also telephone the Study Coordinator at [phone number], Monday through Friday between the hours of 8:00AM and 5:00PM.

Commented [UUIRB17]: Is the necessary contact information provided? Yes.

INSTITUTIONAL REVIEW BOARD

Contact the University of Utah Institutional Review Board (IRB) if you have questions regarding your rights as a research participant. Also, contact the IRB if you have questions, complaints or concerns which you do not feel you can discuss with the investigator. The University of Utah IRB may be reached by phone at 801-581-3655 or by e-mail at irb@hsc.utah.edu, or by U.S. Mail at: 75 South 2000 East, Room 111, Salt Lake City, UT 84112.

Commented [UUIRB18]: This statement is required for all studies. This language should be included verbatim.

MEDICAL TREATMENT OR COMPENSATION FOR INJURY

The VA has the authority to provide medical treatment to participants who are injured by participation in a VA study. If you are injured as a result of being in this study, the VA will provide the necessary medical treatment in accordance with United States federal law. If you want to make a legal claim against the VA or anyone who works for the VA, special laws may apply. The Federal Tort Claims Act (28 U.S.C. 1346(b), 2671-2680) is a federal law that controls when and how a person can bring a claim against the U.S. Government. If you sign this document, you are not giving up your right to make a legal claim against the United States.

Commented [UUIRB19]: For studies conducted at the VA, the statement that the VA will provide treatment for the research related injury is required.

VOLUNTARY PARTICIPATION

It is up to you to decide whether or not to take part in this study. If you decide to take part you are still free to withdraw at any time, and without giving a reason. Refusal to participate or the decision to withdraw from this study will involve no penalty or loss of benefits to which you are otherwise entitled. If you decide not to take part, you will still receive all standard care that is available to you. This will not affect the relationship you have with your doctor or other VA staff members, nor decrease the standard of care that you receive as a patient. If you want to stop being in this study, please let the research doctor know. That way you can find out what should be done about your routine care outside of the study.

Commented [UUIRB20]: Is there a statement that participation is voluntary? Yes.

Commented [UUIRB21]: Is there a statement that individuals may refuse to participate or discontinue participation without penalty or loss of benefits? Yes.

RIGHT OF INVESTIGATOR TO WITHDRAW

The investigator can withdraw you from the study without your approval. Possible reasons for withdrawal include: a positive pregnancy test, inability to comply with the study protocol, worsening of

Commented [UUIRB22]: Is there a description of anticipated circumstances under which the investigator may terminate participation? Yes.

your condition that requires hospitalization to maintain safety, or if the study doctor feels that the study medication is making your condition worse.

COSTS TO PARTICIPANTS AND COMPENSATION

A veteran research participant will not be required to pay for care and services (treatment) received as a participant in a VA research project. However, some veterans are required to pay co-payments for medical care and services provided by the VA. These co-payment requirements will continue to apply to medical care and services provided by the VA that are not part of this study. The research study doctor visits, study medication, laboratory tests, and MRI/MRS scans will be provided to you at no cost.

For attending each study visit, you will receive compensation for time and travel as outlined below:

Study Visit #	Screening	0	1	2	3	4	5	Total
Visit Compensation ($)	100	100	100	25	25	25	75	
							Total Study Compensation ($)	450

If you attend the screening visit but are not eligible to enroll in the study, $100 compensation will be provided. There are no additional charges to you.

NEW INFORMATION

Sometimes during the course of a research study, new information becomes available about the treatment that is being studied. If new information comes out about uridine during the study, a research doctor will tell you about it, and discuss with you whether or not you want to continue participating in the study.

If you decide to withdraw at that time or at any time during the research, your research doctor will make arrangements for your medical care to continue. If you decide to continue in the study, you will be asked to sign an updated consent form. Also, after receiving new information about uridine, your research doctor might decide it is in your best interests to withdraw you from the study. If that happens, the doctor will explain the reasons to you, and make referrals for your medical care to continue.

During the study, we may learn something about your health that could help you and your doctors make decisions about your healthcare. If this happens, we will tell you about these results. We will contact you and make arrangements to discuss this with you.

NUMBER OF PARTICIPANTS

We expect to enroll 90 veteran participants with suicidal ideation, all at the VA Salt Lake City Health Care System (VASLCHCS).

Commented [UUIRB23]: When appropriate, is there a statement that informs VA subjects that insurance will not be charged for costs related to the research? Yes.

Commented [UUIRB24]: Is there a description of any additional costs to the participant? Yes.

Commented [UUIRB25]: Is there a description of any compensation given to the participant, including the anticipated prorated payment, if any? Yes.

Commented [UUIRB26]: Is there a statement regarding significant new findings? Yes.

Commented [UUIRB27]: Is there a description of the consequences of a participant's decision to withdraw and procedures for withdrawal? Yes.

Commented [UUIRB28]: Is there a statement about whether clinically relevant research results will be disclosed to participants? Yes.

Commented [UUIRB29]: Is there a statement with the approximate number of participants involved in the study? Yes.

CONSENT

I confirm that I have read this consent document and have had the opportunity to ask questions. I will be given a signed copy of the consent form to keep. I agree to participate in this research study as you have explained in this document.		
_____ Participant's Name	_____ Participant's Signature	_____ Date
_____ Name of Person Obtaining Consent	_____ Signature of Person Obtaining Consent	_____ Date