

FOR IRB USE ONLY \$STAMP_IRB \$STAMP_IRB_ID \$STAMP_APPRV_DT \$STAMP_EXP_DT

Re: Research Registry

Hello:

We are writing to invite you to be a part of a research registry for the Dietary Approaches to Treat Multiple Sclerosis Related Fatigue. The purpose of this registry is to collect contact information on all persons who apply for this study so that the study team can contact you with additional information about other studies that are either on going, or will happen in the future. We are inviting you to be on this research registry because you have reported that you have a form on Multiple Sclerosis and are interested in participating in a research study.

If you would like to be a part of this registry, we would like you to give us permission to keep some of your demographic information. This will include information on how to reach you (such as mailing address, phone number and email address), as well as information about your Multiple Sclerosis diagnosis (such as the type of multiple sclerosis) and general characteristics (such as gender and birthdate). Keeping this information will allow us to only contact you about research studies which you have the highest probability of qualifying for.

If the answer is yes, you would be contacted and told about these studies. Agreeing to participate in this study does not obligate you to participate in any other studies. You would sign a new consent for any other studies.

To give us permission to keep your demographic information for future use, please send an email to the study team at MSDietStudy@healthcare.uiowa.edu with the following information:

- Your first and last name.
- ***One*** of the following statements:
 - Yes, I would like to be a part of the research registry. You have permission to keep my demographic information.
 - No, I do not want to be a part of the research registry. You do not have permission to keep my demographic information.

We will keep the information you provide confidential, however federal regulatory agencies and the University of Iowa Institutional Review Board (a committee that reviews and approves research studies) may inspect and copy records pertaining to this research.

Risks of allowing us to keep this information, although unlikely, include a potential loss of confidentiality. You may not benefit personally from any of the studies that you may or may not participate in. However, we hope that other may benefit in the future from what researcher learn as a result of their studies.

Taking part in this research study is completely voluntary. You can decide at any time that you

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no longer want to be a part of the registry. If you decide not to be a part of this research registry, or if you decide to withdraw your permission you won't be penalized or lose any benefits for which you otherwise qualify.

If you have any questions about what it means to be part of a research registry, please feel free to contact a member of the study team by email (MSDietStudy@healthcare.uiowa.edu), by phone (319-384-5002 or 319-384-5053), or by mail (200 Hawkins Drive, c/o PIC, SE227 GH, Iowa City, IA 52242). If you have questions about the rights of research subjects, please contact the Human Subjects Office, 105 Hardin Library for the Health Science, 600 Newton Rd, The University of Iowa, Iowa City, IA 52242-1098, (319)335-6564, or email irb@uiowa.edu. To offer input about your experience as a research subject or to speak to someone other than the research staff, call the Human Subjects Office at the number above.

Thank you very much for your consideration. This letter is yours to keep. Sending us the information requested above via email, phone or mail will indicate your permission for us to add you to our research registry.

Sincerely,

Terry L Wahls, MD, MBA



terry-wahls@uiowa.edu

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(secretary)