

THE SOPHIE DAVIS SCHOOL  
THE CITY COLLEGE OF NEW YORK  
OF BIOMEDICAL EDUCATION



Shepard Hall, 108B  
160 Convent Ave  
New York, NY 10031  
212-650-7902 (IRB Office)  
<http://www.cuny.cuny.edu/irb/>

Participant Consent form

**The Sophie Davis 2012 Graduate Follow-up Study**

*Principal Investigators: Ana Motta-Moss, PhD and Donald Kollisch, MD*

We are asking you to complete a questionnaire that will collect career outcomes data for all graduates of the school from 1977 through 2005. The results of the study will document the achievements and experiences of all graduates of the Sophie Davis School.

**Study Background information**

The study data will profile the range of career choices and experiences of the Sophie Davis graduates, as well as their practice organizations, research and academic commitments, awards, community involvement, economic status and satisfaction with their career choices.

**Study Procedures**

If you choose to take part in the study, we will ask you a set of questions about your experiences while you attended the Sophie Davis School and about your experiences after you left the school. Completing the questionnaire will take approximately 20 to 30 minutes. You are under no obligation to participate in the study. You do not have to complete any questionnaire item if you do not want to answer it but we ask that you answer as many questions as you can. You may terminate the questionnaire at any point without any consequences.

**Risks/Benefits**

No sensitive or overly personal information is requested in the questionnaire. The study has no foreseeable risks except that some question items may bring to mind memories of academic, social or other difficult situation that you experienced during your medical education and training. If any of the situations or experiences that you recall are upsetting to you, you may want to call or email the research director, Dr. Ana Motta-Moss (see contact information below) to discuss these issues.

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Subject's Initials: \_\_\_\_\_ Date: \_\_\_\_\_

**(IRB Official Use Only)**

This Consent Document is approved for use by The City College New York's Institutional Review Board (IRB). Only the IRB-stamped approved form may be used.

Approved: From: 5/20/2011 To: 5/19/2013

The study expiration date applies for this form

Template rev. date: 3/23/2011

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You will not receive any direct benefits from this study except for an indirect benefit from knowing you are helping improve the education provided by the Sophie Davis School to future medical students.

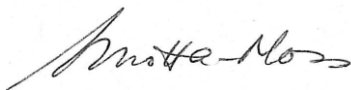
**Confidentiality**

Your responses to all of the questionnaire items will remain confidential and will only be used in an aggregate form for the purpose of the study. The research director will not give personally identifiable survey data to school, and the school will not request any personally identifiable study data. To protect your confidentiality, all study data will be stored in locked cabinets and password protected electronic media. The highest level of physical and electronic security will be maintained but, as with all paper or electronic data, a potential risk of a breach of confidentiality exists through intrusion of physical sites, internet data streams, internet-server/computer connections, or postal mail or messenger services. We will take all measures in our power to avoid these occurrences.

A section of the study materials will ask you to enter information about your medical education after you left the Sophie Davis School. We received graduate contact information from the Sophie Davis School to conduct the study. If the contact information is not correct, we will share the updated contact information with the school so that they may continue to communicate with all graduates of the school

**Contact information**

If you have any questions about the study, you may call the research director and study co-principal investigator, Dr. Ana Motta-Moss, at 212-650-7698 or at amotta@med.cuny.edu. You may also contact Dr. Donald Kollisch, Dean of Academic Affairs and study co-principal investigator, at 212-650-7902, or at kollisch@med.cuny.edu. For additional information about this study, you may also contact Ms. Tricia A. Mayhew-Noel, IRB Administrator at the City College of New York, at 212-650-7902.



\_\_\_\_\_  
Ana Motta-Moss  
Director of Research & Study Principal Investigator

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Subject's Initials: \_\_\_\_\_ Date: \_\_\_\_\_

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*Consent Statement: I have read and understood the information above. The researcher has answered all the questions I had to my satisfaction. I consent to take part in the Sophie Davis 2012 Graduate Follow-Up Study.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

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Subject's Initials: \_\_\_\_\_

Date: \_\_\_\_\_

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