

Virtual consent

Thank you for your interest in the Hurricane [Name] Personal Chemical Exposure Study. The purpose of this study is to measure pollution you may be exposed to. We are asking you to wear a silicone wristband. This wristband detects over 1,530 chemicals. You would wear the wristband for 7 days. You would also complete questionnaires (up to 30 min each). Your participation is voluntary. You must be at least 18 years old to complete this survey. If you are a parent looking to enroll your child, you will complete this survey for them. A survey must be filled out for each person wanting to enroll.

The information you provide will be kept confidential to the extent permitted by law. Participation is voluntary and you may leave the study at any time. We are looking for individuals who experienced flooding due to Hurricane [Name], or who are involved in clean-up activities. Up to two people from the same household may enroll.

Conflict of interest statement: A conflict of interest occurs when a researcher or the University has a financial or other business interest that could affect the researcher. Drs. Anderson & Rohlman have a conflict of interest. They own or are related to someone who owns a company providing services related to the silicone wristbands. Contact the Human Research Protection Program 541-737-8008 if you have concerns.

OSU Employees: Choosing not to participate will not affect your employment or benefits at OSU.

OSU Students: Your decision to take part or not take part in this study will not affect your grades, your relationship with your professors, or standing in the University.

1. Please check which age group applies to you (the person filling out the survey)
 - a. 0-17
 - b. 18-35
 - c. 36-65
 - d. 66 or older
 - i. *IF* 0-17 selected, “Unfortunately, you do not qualify for this study. Thank you for your time.” **END PROCESS**
2. Please mark which of the following applies to you:
 - a. I am involved in Hurricane [Name] flood clean-up activities such as ‘muck and gut’, cleaning out my flooded home or cleaning flooded homes of others **GO TO 3**
 - b. The home I was living in flooded due to Hurricane [Name] **GO TO 3**
 - c. Neither
 - i. Thank you for your time. This study is evaluating the impact of flood clean-up or exposure from flooded homes. At this time, you do not qualify to participate. **END PROCESS.**
3. Would you like to participate in this study? By marking **Yes**, you indicate that you understand the study and that you agree to take part in the study.

If YES: Thank you! We’re going to ask you a few questions about the study.

IF NO: Thank you for your interest. **END PROCESS.**

4. Who are you filling this out for?
 - a. Myself
 - i. Please provide your full name (First Name, Last Name)
 - b. My child (age 5-17)
 - i. Please share this information with your child
 1. We are asking you whether you want to be in a research study. Research is a way to test new ideas and learn new things. You do not have to be in the study if you do not want to. You can say Yes or No. If you say yes now, you can change your mind later. We are asking you to be in the study because your house flooded or because you are helping clean up after Hurricane [NAME].
 2. We are asking you to wear a silicone wristband for up to 7 days. We will write a report when the study is over, but we will not use your name in the report.
 3. Would your child would like to be part of the research study?
 - a. *If Yes* Please provide your child's full name (First Name, Last Name)
 - c. My child (5-17); I am their legal guardian
 - i. Please share this information with your child
 1. We are asking you whether you want to be in a research study. Research is a way to test new ideas and learn new things. You do not have to be in the study if you do not want to. You can say Yes or No. If you say yes now, you can change your mind later. We are asking you to be in the study because your house flooded or because you are helping clean up after Hurricane [Name].
 2. We are asking you to wear a silicone wristband for up to 7 days. We will write a report when the study is over, but we will not use your name in the report.
 3. Would your child would like to be part of the research study?
 - a. *If Yes* Please provide your child's full name (First Name, Last Name)
 - d. Someone else
 - i. This form can only be filled out by the individual that wants to participate, or by a parent/legal guardian that wishes to enroll their child. Children age 18 or older must fill out this form on their own.
5. Earlier we described the study and what you would need to do. Please mark the study activities you and/or your child would be asked to participate in:
 - a. Wear a wristband
 - b. Take photographs of flood damage
 - c. Fill out questionnaires

- d. Take water samples
- e. None of the above

[Correct answers: a & c. If correct answers are given, **GO TO 6.**]

[Incorrect answers: b, d, e. If incorrect answers are given, show participant the description of the study again. They may then return to the question. They get 2 tries. If they cannot answer the question properly, **END PROCESS:** “Thank you for your interest in our study. We are unable to enroll you at this time.”]

- 6. For this study, we are collecting personal exposure data by using a silicone wristband. Once we receive your wristband, we will store it. We are applying for funding to cover all the costs of analysis. We will not begin analysis until we have the funding to do so. There is no cost to you.
 - a. By choose Yes, you are agreeing that we will collect a wristband but we will not be able to give you the results of that wristband if and until we receive funding.
 - i. If No: “Thank you for your interest in our study. We are unable to enroll you at this time.” **END PROCESS**
- 7. As a participant in this study, you have the option to receive your results from the study once they are analyzed. Would you like to receive your individual results? (Your answer does not impact your participation in this study).
- 8. May we use your samples in future studies? (Your answer does not impact your participation in this study).
- 9. We may reach out to you for other research studies related to this one. May we contact you again for related research? (Your answer does not impact your participation in this study).
- 10. Thank you! Now, we are going to ask you some questions about you (or your child if you are filling this out as a parent/legal guardian). You may skip any questions you do not want to answer. You may leave the study at any time.

[**BEGIN Questionnaire**]