TO: University of Colorado Boulder Institutional Review Board

FROM:

SUBJECT: CU-Boulder IRB Protocol Letter Coded Information Agreement

PROJECT #

IRB #

DATE:

This Memorandum of Understanding, between (Data Provider and institution) and (local Data Recipient and Institution) is being written with respect to (Scope of Data Recipient’s responsibilities) being collected under this protocol. Specimens/instruments will be collected in (location) and sent to Boulder as per agreed protocols. Specimens/instruments will be completely de-identified and the only data that will be sent to (Data Recipient) in Boulder, will be specimens/instruments labeled with (Description of identifiers of Data provided. May not include any of the HIPAA 18 elements of identity). No other identifying information will be sent to Boulder. At no time, will any identifiable information be sent to (Data Recipient) even if requested by him/her to address an unanticipated eventuality. The results generated at this site will be sent, for incorporation into the research using the above identifiers. Both the undersigned agree upon this protocol for specimen/instrument processing and result dissemination, between all parties involved in the collaboration.

Data **Provider:** Title:

Institution:

Contact Information:

Date:

Data **Recipient**  Title:

Institution:

Contact Information:

Date: