



Consent for Blood Sample Donation

Canine Genome Project • Ostrander Lab • National Institutes of Health

Research Statement:

We would like to obtain a sample of whole blood from your dog. The blood extraction is to be done by a licensed veterinarian or a veterinary technician experienced in canine phlebotomy. DNA/RNA extracted from the blood sample will help us better understand genetic issues related to canine health, including disease susceptibility, morphology and patterns of genetic diversity between breeds.

What are the risks involved with obtaining a blood sample?

Blood is extracted with a needle, typically from a vein in the foreleg, using standard sterile technique. The risks involved are minimal. They include slight pain or discomfort during the draw, a bruise caused by minor seeping or blood around the puncture and a small amount of blood loss. The chance of excessive blood loss is rare. NIH and its employees will not be liable for any damage or injury sustained by any person or persons or property as a result of the blood draw process. Compensation is not available in the unlikely event of physical harm to your dog resulting from the blood draw procedure.

Who will have access to the information and specimen?

Only the Ostrander lab staff and their direct collaborators will have access to the information you provide and the DNA/RNA sample from your dog. No information or DNA/RNA will be shared with other members of your breed club or the AKC and its agents, unless and when you approve so in writing. Your dog will be identified in public talks and published studies only by a unique Ostrander lab study ID number. Your dog's pedigree and AKC number, as well as your own contact information will be kept strictly confidential. It is understood that you will receive no individual results regarding your dog, no unused DNA/RNA will be returned to you, and that study participants have no claim on intellectual property or patents resulting from the use of your dog's DNA/RNA sample.

We would like to be able to contact you for follow up information about your dog or progress on our research. If you do not wish to be recontacted, please check here:

No, I do not wish to be contacted regarding my sample donation.

Dog Owner's Statement:

I have read the information provided above and have had an opportunity to ask questions regarding the procedures involved. I am the owner or the agent for the owner of the dog described below and I have the authority to execute this release. My signature below indicates I voluntarily agree to give my dog's blood sample for this study.

Owner's Signature _____ Date _____

Please Print Your Name _____

Email Address _____ Phone _____

Street Address _____

City _____ State _____ Zip code _____

Dog's Registered Name _____ Dog's Call Name _____

Dog's Breed _____ Male Female

Registration Number _____ Date of Birth _____

Coat Color: _____ Nose Pigment: _____ Coat Type: _____

Has the dog ever been diagnosed with a disease? If so what: _____

Weight (lbs) _____ Height at the Withers (in.) _____

If your dog has been diagnosed with a disease, such as cancer, please attach a copy of the pathology report to this form.

If the pedigree of this dog is known, please attach a copy of the pedigree to this form.