

INTERNATIONAL REGISTRY OF WERNER SYNDROME AND OTHER PROGEROID SYNDROMES

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March 1, 2004

Dear,

Thank you very much for contacting us about your patient. Based on your description, this individual would be eligible for our research study. Please find enclosed/attached the clinical forms and consent forms for your review. If after review the patient is interested in participating, please let us know and we can help arrange consent, sample collection and shipment.

If you are willing to help us by consenting the patient and collecting and shipping the blood and/or skin biopsy, by regulatory definition this is "engaging in research" and must have oversight by an ethics review board (e.g. Internal Review Board or Human Subjects Committee). Please follow your local regulations. If a review board is not available to you, we have enclosed an unaffiliated researcher agreement and copy of the Belmont report. This document would recognize the University of Washington Human Subjects Committee as the designated IRB for review and continuing oversight of the research.

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