

1 **Thomas Jefferson University**
2 **Informed Consent Document for Human Subjects Research – OHR-8 (v. 7/8/15)**
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4 **Department:** Department of Radiology_____

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6 **Principal Investigator:** _____ John Eisenbrey, PhD **Telephone:** _____ 215-503-5188
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8 **Co-Investigator(s):** Colette Shaw, MD, Flemming Forsberg, PhD, Andrej Lyshchik, MD, PhD;
9 Jesse Civan, MD; Patrick O’Kane, MD, Allison Tan, MD; Amanda Smolock, MD

10
11 **Medical Study Title:** 2D and 4D Contrast Enhanced Ultrasound Evaluation of Hepatocellular
12 Carcinoma Chemoembolization

13
14 **Lay Study Title:** A research study to see if ultrasound imaging combined with a contrast agent
15 can determine whether the embolization procedure to treat your liver mass was successful
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19 **What Is Informed Consent?**
20

21 You are being asked to take part in a medical research study. As required by federal regulations,
22 this research study has been reviewed and approved by an Institutional Review Board (IRB), a
23 University committee that reviews, approves and monitors research involving humans. Before a
24 knowledgeable decision about whether to participate in a research study can be made, the
25 possible risks and benefits related to the study should be understood. This process of learning and
26 thinking about a study before deciding to participate is known as *informed consent* and includes:

- 27 • Receiving detailed information about this research study;
- 28 • Being asked to read, sign and date this consent form once the nature of the study is
29 understood and a decision is made to participate. If there is anything about the study you
30 don’t understand or if there are questions, you should ask for explanations before signing
31 this form;
- 32 • Being given a copy of the signed and dated consent form to keep for your own records
33

34 A patient who joins a research study has a relationship with the study doctor that is different than
35 the relationship with a treating or personal doctor. A treating doctor treats a specific health
36 condition with the goal of improving that condition. A study doctor treats all subjects according
37 to a research plan to obtain information about the experimental drug, device or procedure being
38 studied and with the understanding that there may or may not be benefit from being in the study.
39 The study doctor and study staff can provide more information about research as opposed to
40 treatment.
41
42

43 **What is the purpose of this study?**

44 You are being invited to participate in this study because you are scheduled to have a type of
45 treatment for a mass on your liver called transarterial chemoembolization (TACE). TACE
46 involves injecting drugs that treat cancer with small beads or oil directly into a blood vessel that
47 supplies blood to the mass. The beads or oil block the blood flow to the tumor, as well as deliver
48 cancer drugs directly to the mass. Normally, about 1 month after the TACE procedure, you will
49 be scheduled for an MRI or CT to determine whether the TACE procedure successfully treated
50 the liver mass. The MRI or CT involves the use of a dye that can sometimes cause side effects.
51 The purpose of this study is to determine whether another type of imaging test with ultrasound
52 imaging and a contrast agent that does not involve dye can be used to determine whether the
53 TACE procedure treated the liver mass, and if this test can determine the treatment effectiveness
54 earlier. If this is successful, it is possible that people can have this ultrasound imaging exam
55 earlier and rather than the MRI with dye.

56
57 This is a Phase 2 study. Phase 2 research studies are done to get further information on safety,
58 dosage, and side effects and to collect preliminary information about how well a drug works
59 (often referred to as efficacy). Phase 2 studies usually have very strict rules about who may and
60 who may not be in the study. Phase 2 studies may compare a new drug to a placebo (inactive
61 substance) or to a known treatment.

62
63 You are being asked to participate in this study because you are scheduled for TACE of a liver
64 mass. The purpose of this study is to compare the results of ultrasound imaging with contrast
65 (CEUS) at 1 -2 weeks and 1 month after your TACE with that of the MRI or CT that your doctor
66 has scheduled to receive 1 month after your TACE procedure.

67
68 The ultrasound contrast agent being used in this study is Definity. Definity is an ultrasound
69 contrast agent that contains tiny gas bubbles about the same size as red blood cells that reflect
70 ultrasound (sound waves). The microbubbles in Definity stay in areas of blood vessels and
71 reflect sound waves and show where there is blood flow. Definity is FDA-approved in the United
72 States for use with echocardiography (ultrasound of the heart).

73
74 For this study, the CEUS imaging will be performed on an FDA-approved ultrasound system, the
75 Logiq E9. To acquire and process the CEUS images, the ultrasound system software has been
76 modified to detect Definity. This only changes the way in which the images are processed by the
77 ultrasound system. It does not change the strength or the composition of the sound waves being
78 transmitted to your body.

79
80 **How many individuals will participate in the study and how long will the study last?**

81 210 patients will participate nationally. We hope to enroll **up 100** patients at Jefferson. Each
82 participant will be in the study for about 1 month. The entire study will take about 5 years to
83 complete.

84
85

86 **What will happen during the study?**

87 Individual participation in this trial will be limited to three 60 minute exams including the CEUS
88 exam and monitoring you after the CEUS. The first examination will be on the morning of your
89 scheduled TACE procedure prior to the procedure, the second will be 1-2 weeks after the TACE
90 procedure, and the third will be on the day you come in for your MR imaging at 1 month after the
91 TACE and will be performed prior to the MR imaging.

92
93 For all 3 research visits, you will be asked to review your medical and surgical history,
94 any current medications you are taking, and any known drug allergies or intolerances. If you are
95 a woman of childbearing potential, you will have a urine pregnancy test (the results of which will
96 be made available to you prior to the start of the research study). For the CEUS, an intravenous
97 catheter (small plastic tube) will be placed in a vein in your arm. You will be asked to lay on
98 your back on an examination table. Ultrasound gel, to assist in the ultrasound imaging, will be
99 applied to the area of your abdomen over your liver. An ultrasound probe will be moved across
100 the area over your liver to obtain the ultrasound images.

101
102 A standard (without contrast) ultrasound examination of your liver will be performed to locate
103 the liver mass and obtain information about the size, shape and ultrasound characteristics. After
104 the standard exam is complete, you will receive an injection (approximately 1 teaspoon)
105 of Definity through the catheter in your arm, followed by an injection of saline (salt water). You
106 will then have continuous CEUS imaging for 1 minute. If the Definity is not seen on the CEUS,
107 you may receive a second injection of Definity through the catheter in your arm, followed by
108 another injection of saline (salt water). This will be followed by CEUS imaging. The CEUS
109 imaging will not feel any different than the standard imaging.

110
111 You will be monitored during the entire procedure and for 30 minutes after the final injection of
112 Definity.

113
114 The CEUS findings will be compared to the MRI or CT results at 1 month. Additionally, the
115 CEUS results will be compared to the long term outcome of your TACE treatment.

116
117 **What are the side effects and other risks or discomforts involved?**

118 There are no risks from the use of diagnostic ultrasound.

119
120 The majority of adverse events from Definity are temporary and mild in severity. Of the
121 reported adverse reactions following the use of Definity the most frequently reported were
122 headache (2.3%), back and renal pain (2.1%), sudden increase in blood flow to face (1.1%) and
123 nausea (1.0%). Hypersensitivity reactions (severe allergic reaction that may include abnormal
124 redness of skin, slow heart rate, low blood pressure or, rarely, difficulty breathing) to Definity
125 may occur, although rare.

126
127

128 The company that makes Definity has indicated that there is the potential of serious heart and
129 lung reactions occurring uncommonly during or following administration of Definity. The risk is
130 only in patients with heart and lung problems. You will be screened for any of these conditions
131 and if it is found that you have any of these conditions, you will not be able to participate in this
132 study.

133
134 The use of an intravenous needle and the fluids given through the needle may cause minor
135 discomfort, bleeding under the skin (bruise), and possible infection at the site of needle insertion.
136

137 The only other risk is the possible breach of confidentiality. The investigators will take every
138 precaution to ensure patient confidentiality will be maintained.
139

140 You should tell or call the study doctor as soon as possible at 215-503-5188 if, during the course
141 of this study, you develop any of these side effects or symptoms. The study doctor has told you
142 that if your condition worsens, if side effects become very severe, or if it turns out that being in
143 this study is not in your best interest, you will be taken out of the study. If you have any side
144 effects or symptoms after normal business hours go the nearest emergency room. If questions
145 come up about side effects, ask the study doctor or staff at any time during or after the study.
146

147 **Are there benefits from being in this study?**

148 There may be no benefit from being in this research, but we hope that what we learn may be
149 helpful to future patients or society in general.
150

151 **Are there alternatives to being in the study?**

152 Participation in this study is entirely voluntary. The alternative to being in the study is to only
153 have the standard of care 1 month post chemoembolization MRI or CT scan.
154

155 **How will privacy and confidentiality (identity) be protected?**

156 Federal regulations require that certain information about individuals be kept confidential. This
157 information is called “protected health information” (PHI). PHI includes information that
158 identifies an individual personally such as name, address and social security number, or any
159 medical or mental health record, or test result, that may have this sort of information on it. The
160 laws state that people may see and review their medical records at any time. However, in a
161 research study, people may not see the study results or other data about the study until after the
162 research is completed unless the study doctor decides otherwise.
163
164

165 The following individuals or entities may have access to your PHI and by law must protect it.
166 These include investigators listed on this consent form and other personnel of Thomas Jefferson
167 University, Jefferson University Physicians, Thomas Jefferson University Hospitals, Inc. (add the
168 Rothman Institute if applicable) involved in this specific study, the University's Office of Human
169 Research and the Institutional Review Board (IRB), and your health insurance company (if
170 necessary for billing for standard medical care).

171
172 PHI collected during this study may also be shared with the following entities that, while not
173 obligated by law to protect PHI, will protect it to the best of their ability:

- 174 • **NIH** which is providing funds to Thomas Jefferson University/Jefferson Health to
175 conduct this research
- 176 • The Food and Drug Administration (FDA)
- 177 • Dr. Robert Den, the medical monitor for the study, who will review medical records if
178 any unexpected side effects occur.
- 179 • Research Monitors hired by the sponsor to oversee the study and review medical records
180 to ensure study-related information is correct,
- 181 • With any person or agency required by law.

182
183 The following information will be provided to the study sponsor and other entities noted above:
184

185 **Study data for analysis:** *The ultrasound images, MRI or CT images and reports, outcome,*
186 *pregnancy test (if applicable), and medical/surgical history to determine whether CEUS can access*
187 *whether TACE was successful and to see whether you meet the eligibility criteria.*

188
189 **Demographic data:** Your race and ethnicity to track enrollment statistics

190
191 **Other:** None

192
193 If you develop an illness or injury during the course of participation in this study, other PHI
194 about treating and following the condition may be generated and disclosed as it relates to this
195 study.

196
197 PHI collected as part of this research may be used indefinitely.

198
199 You may quit the study and revoke permission to use and share PHI at any time by contacting the
200 principal investigator, in writing, at: John Eisenbrey, PhD Thomas Jefferson University, 132
201 South 10th Street, 7th Floor, Philadelphia, PA 19107. Further collection of PHI will be stopped on
202 those who quit the study, but PHI that has already been collected may still be used.

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207 The results of clinical tests and procedures performed as part of this research may be included in
208 your medical records. The information from this study may be published in scientific journals or
209 presented at scientific meetings but no one will be personally identified in these publications and
210 presentations.

211
212 A description of this clinical trial will be available on <http://www.ClinicalTrials.gov>, as required
213 by U.S. Law. This Web site will not include information that can identify you. At most, the Web
214 site will include a summary of the results. You can search this Web site at any time.

215
216 **What happens in case of injury as a result of being in this study?** In the event of a research-
217 related injury, necessary and available medical care (including hospitalization) will be provided.
218 A research-related injury is a physical injury or illness that is directly caused by any procedure or
219 treatment used in this study that is different from the treatment you would receive if not
220 participating in a research study. If physical injury occurs due to any drug/substance or procedure
221 properly given under the plan for this study, medical expenses for treating the injury will be
222 billed to your insurance carrier. You should be aware that some costs may not be covered by
223 insurance and may become your responsibility. There is no plan to provide compensation for loss
224 of wages, lost time from work, personal discomfort, or for injuries or problems related to your
225 underlying medical condition(s).

226
227 If you have questions about the sponsor's agreement regarding payment for a research-related
228 injury please discuss with the study doctor.

229
230 If a bill related to a research-related injury is received that seems wrong, please discuss it with
231 the study doctor or research coordinator.

232
233 **Is there payment for being in this study?**

234
235 There is a payment \$100/33.00 per/scan for participating in this study.

236
237
238 **Disclosure of Financial Interest**

239
240 The sponsor of this clinical study, NIH, is paying Thomas Jefferson University to conduct this
241 study.

242
243

244 **Are there costs related to being in this study?**

245

246 ***Research Procedures***

247

248 There are no charges to you or your insurance carrier for study visits or tests that are part of this
249 research. The three CEUS exams and the pregnancy test are purely related to the research.
250 Neither you nor your insurance carrier will be charged for this research CEUS imaging.

251

252 ***Standard Testing Procedures***

253

254 Standard of care procedures and doctor visits will be billed to your health insurance carrier.
255 These are charges that would be billed to insurance whether in a research study or not. It is
256 possible that insurance coverage may be denied. If that happens you may be responsible for some
257 or all of these charges. The study doctor [or study staff] will explain which procedures, tests and
258 doctor visits are considered standard of care.

259

260 If a bill is received that you think is wrong, please discuss it with the study doctor or research
261 coordinator.

262

263 **What if the research results in new findings?**

264

265 Anything learned during the study, beneficial or not, that may affect your health or willingness to
266 continue in the study, will be explained.

267

268 **Can I be removed from the study or quit the study?**

269

270 Your decision to participate in this research study is entirely voluntary. You have been told what
271 being in this study will involve, including the possible risks and benefits.

272

273 Your participation in this research project may be terminated by the study doctor or study
274 sponsor without your consent for any reason that he/she feels is appropriate.

275 You may refuse to participate in this investigation or withdraw consent and quit this study
276 without penalty and without affecting the ability to receive medical care at Thomas Jefferson
277 University/the Rothman Institute.

278

279 If you withdraw from this study, you may continue treatment with your Jefferson doctor, or you
280 may seek treatment from another doctor of your choice.

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283 **CONTACT INFORMATION**

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285 **If you are having a medical emergency, call 911 or go directly to an emergency room. You**
286 **should let emergency personnel or providers know that you are participating in this study.**

287

Telephone number for questions about your rights as a research participant	The Jefferson Institutional Review Board	215-503-8966
For questions, concerns or complaints about the research, or if you suspect a research-related injury	The Principal Investigator, Dr. John Eisenbrey, PhD or any co-investigator listed at the beginning of this form	215-503-5188
If you have difficulty contacting the study staff	Call the Jefferson Office of Human Research	215-503-0203

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290 If you want more information about the Jefferson Institutional Review Board or Jefferson's
291 Human Research Protection Program, please visit our website at
292 http://www.jefferson.edu/human_research/irb/index.cfm.

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296 **Subject Communications**

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298 Do you wish to communicate with the study staff by e-mail? YES _____ NO _____

299

300 If you checked yes, please print your e-mail address on the line below.

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302

303

304 **RISKS:** E-mail correspondence is not always secure and there is a risk of loss of confidentiality.
305 To help protect against loss of confidentiality, all e-mail that originates from Jefferson University
306 or Jefferson Hospital employees using Jefferson University or Jefferson Hospital e-mail
307 addresses is encrypted. That means, unless you have allowed others to have access to your e-
308 mail, only you will see the e-mail.

309

310 **YOU SHOULD NEVER USE E-MAIL TO REPORT A SUSPECTED ADVERSE EVENT OR**
311 **ANY OTHER MEDICAL PROBLEM. THESE SHOULD BE REPORTED BY TELEPHONE.**

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