

Title:	Social Media and Cancer Screening Information
NCT Number:	NCT06712901
Document Date:	16Sep2025
PI:	Andy King, PhD
IRB Number:	IRB 00183491



Date: Friday, January 16, 2026 10:12:02 AM

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IRB_00183491

Created: 9/23/2024 9:54 AM

IRB_00183491

PI: Andy King PhD

Submitted: 9/27/2024

1. Contacts and Title

Title: Social Media and Cancer Screening Information

1. Study Introduction

1. Responsible Investigator:

[Andy King](#)

Email	Training	Col Date
andy.king@utah.edu	2/23/2025 SMG	12/14/2025

a. Position of the Investigator:

☒ Faculty or Non-Academic Equivalent

☐ Student

☐ Staff

☐ Resident/Fellow

☐ Other

2. Contact Persons for the Responsible Investigator:

Name	Email	Training
Andy King	andy.king@utah.edu	2/23/2025 SMG

3. Guests of the Responsible Investigator:

Last Name	First Name	E-Mail
There are no items to display		

4. What type of application is being submitted?

[New Study Application](#) (or Amendment/Continuing Review)

5. Title Of Study:

Social Media and Cancer Screening Information

6. Study Purposes and Objectives:

To test if messages ranked highly in a previous study examining message preferences are actually more effective at influencing intentions to adhere to recommendations about cancer screening and share information about cancer screening.

7. Is this a multi-site study, where more than one site needs IRB approval?

☐ Yes ☒ No

8. Background and Introduction:

A full background and introduction can be found in the grant application. The big background is that (1) health communicators struggle to identify what content is best presented to intended audiences, (2) using innovative crowdsourced ways to identify message content is a potential solution for selecting high quality message content to disseminate (which occurred in a previously approved and completed study), but to know for sure (3) we need to test if the identified messages from the crowdsourcing study are actually more effective than less preferred messages. We are completing the last step of this process in the current study.

2. Study Location and Sponsors

1. Add all locations applying for approval of research via the University of Utah IRB or Human Research Protection Program (HRPP).

Click the appropriate button(s) below to add locations:

Site Name	Investigators Name	Covered Entity	Sub Sites
View University of Utah	Andy King	Yes	

2. Will a Central IRB (CIRB) or Single IRB (SIRB) model be used for review of this study for the sites listed in this application?

☐ Yes ☒ No

3. Indicate the source(s) of funding obtained or applied for to support this study.

Sponsor	Sponsor Type	Sponsor Contact Information	Prime Sponsor	Prime Sponsor Type	OrgID
View NIH NATIONAL CANCER INSTITUTE	Federal Government				11259

4. Does this study have functions assigned to a Contract Research Organization (CRO)?

☒ Yes ☐ No

a. Provide CRO Contact Information:

NORC/AmeriSpeak; Bruce Barr (bruce-barr@norc.org)

5. Does this study involve use of the Utah Resource for Genetic and Epidemiologic Research (RGE)?
Examples: Utah Population Database (UPDB), Utah Cancer Registry (UCR), All Payers Claims Database (APCD), etc.

☐ Yes ☒ No

Addition of a Site

1. **Site Name:**

University of Utah

2. **Site Principal Investigator**

☒ **Mark if Same as Responsible Investigator (syncs with investigator on the first page)**

[Andy King](#)

Email	Training	Col Date
andy.king@utah.edu	2/23/2025 SMG	12/14/2025

a. **Position of the Site Principal Investigator**

[Faculty or Non-Academic Equivalent](#)

b. **Will the Site PI consent participants?** ☒ Yes ☐ No

3. **Site Contact Persons, if different from the Site PI:**

☒ **Mark if Same as Contacts for Responsible Investigator (syncs with contacts on the first page)**

Name	Email	Training
Andy King	andy.king@utah.edu	2/23/2025 SMG

4. **Site Staff and Sub-Investigators**

Name	Email	Training	Obtaining Consent	Col Date
Yi Liao	u1368483@utah.edu	3/1/2023 SMG	<input type="checkbox"/>	12/2/2025

5. **Site Guests:**

Name	Email	Training
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There are no items to display

6. **Select HIPAA coverage for this study:**

Study procedures will be conducted within a HIPAA Covered Entity at this site (HIPAA Privacy Rule applies)

7. **Select the study procedures that will be conducted at this site:**

[Data analysis](#)

8. **Select the University of Utah department responsible for this research:**

COMMUNICATION

9. **Add any additional sites that are part of this performance group**

There are no items to display

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IRB Smart Form

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Sponsor Information

- a. Are you receiving award or contract management for the sponsored funds through the University of Utah Office of Sponsored Projects?

☒ Yes ☐ No

If yes, select the associated OSP Proposal ID/DSS through eAward to link it to the ERICA system.

You must have a fully approved Proposal ID/DSS number through eProposal which will show up in eAward after OSP has integrated the ID. To access the eAward application, use the instructions on the OSP website.

Link to a Proposal ID/DSS through eAward

Proposal ID/DSS: 10066084

PI: KING,ANDREW

Sponsor: NIH NATIONAL CANCER INSTITUTE

Prime Sponsor:

Department:

Short Title: KING R37 TRANSFER

Sponsor Award Number: 5R37CA259156-04

Type: Federal Government

Award Start Date: 7/1/2022

Award End Date: 2/28/2025

Prime Sponsor Type:

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3. Participants

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3. Participants

1. Ages of Participants:

18 and older

(Consent form needed)

2. Specific age range of participants (e.g., 7-12 years old, 60+, etc.):

45-75

3. Indicate any vulnerable participant groups (other than children) included:

None

If "Other", please specify: N/A

If "None" and no children are involved, answer the following question.

Has the participant selection process overprotected potential subjects who are considered vulnerable so that they are denied opportunities to participate in research?

☐ Yes ☒ No

4. Number of participants to be included and/or enrolled in this entire study, across all study locations: 2030

5. Characteristics of Participants/Inclusion Criteria:

Split sample of Black and White Americans between the ages of 45 to 75. This is the recommended age group for people to be screened for colorectal cancer, which is the topic of the study. We are interested in comparing messages preferred by Black and White Americans who speak English specifically.

6. Participant Exclusion Criteria:

Non-English speakers or self-report having colorectal cancer in the past

7. Is a substantial percentage of the participant population anticipated to be non-English speaking?

☐ Yes ☒ No

4. Study Information

1. Design of Study (select all that apply):

☒ **Non-Experimental and/or Descriptive Research Design:**

Survey/Questionnaire Research

☒ **Experimental and/or Interventional Research Design:**

Randomized Trial

Prospective Social/Behavioral Intervention or Experiment

Is the prospective social/behavioral intervention or experiment intended to evaluate a health-related outcome?

☐ Yes ☒ No

☐ **Development of a research resource (repositories, databases, etc.)**

There are no items to display

☐ **Other**

2. Does your study involve the use of any placebo?

☐ Yes ☒ No

3. Length of entire study, from initiation through closeout:

About 15 minutes

4. How will participants be recruited or identified for inclusion in the study?

a. Select all methods that will be used:

From a database or participant pool for which participants have given prior permission to be contacted for research studies

b. Describe the recruitment/participant identification process in detail (e.g. who will review charts or records, who can refer participants to the study, where will flyers be posted, how often will recruitment letters be sent, when will follow-up phone calls be made, etc.):

Participants will be recruited by the survey vendor, NORC/AmeriSpeak, from their national panel of potential participants who have all consented to be contacted for research activities.

5. How will consent be obtained?

Informed Consent Process (with or without a document)

6. Describe all the procedures chronologically, from screening/enrollment through study closeout, which will be completed in the research project.

NORC/AmeriSpeak will put all of the study content into their system. They will send out the opportunity to participate in the study, which should take about 15 minutes, to people in their panel who meet our participation criteria (see previous section). Participants will be directed to the study information sheet that includes all elements of consent. Participants who agree to participate will start the survey experiment. The survey experiment will randomize participants into one of five conditions: (1) control (no exposure), (2) overall median ranked messages (from the prior

study), (3) messages preferred by all participants, (4) messages preferred by Black American participants, and (5) messages preferred by White American participants. Approximately 400 people will complete each condition. After viewing the study stimuli (or no stimuli in the control condition), participants will respond to various outcomes and other variables of interest (see questionnaire draft included). Participants will receive an agreed upon incentive from NORC/AmeriSpeak. After all 2,000 people have completed the study, we will receive a de-identified data file from NORC/AmeriSpeak with all study data and engage in analysis. We will plan to close the study around that time as we complete data analysis and write-up our findings.

7. **Are all procedures for research purposes only (non-standard or non-standard of care procedures)?**

☒ Yes ☐ No

If no, list the procedures that are performed for research purposes only (non-standard or non-standard of care procedures):

N/A

8. **Is there a safety monitoring plan for this study?**

☐ Yes ☒ No

9. **Provide a summary of the statistical methods, data analysis, or data interpretation planned for this study. Factors for determining the proposed sample size (e.g., power) should be stated.**

Power analysis was determined a priori in the grant application. We are powered to find a small to medium effect, which is what is generally expected in this type of research. We will use analyses typically using various regression procedures.

Consent Process

1. **The following investigators and internal staff will obtain consent (as indicated on the Study Location and Sponsors Page):**

Andy King

(PI) University of Utah

List by name, role, and affiliation any others who will obtain consent (e.g. Dr. John Smith, Co-Investigator, etc.).

The survey vendor will obtain consent

2. **Describe the location(s) where consent will be obtained.**

Online

3. **Describe the consent process(es), including the timing of consent. Describe whether there is a waiting period between the consent process and obtaining consent from the participant (i.e., any time between informing participants and actually obtaining consent).**

Participants will view the information sheet with all elements of consent after being sent the study information from the survey vendor. At that point, potential participants can decide if they want to participate or exit and not participate. Participants who agree to participate after reading the elements of consent would begin the study.

4. **Describe what measures will be taken to minimize the possibility of coercion or undue influence.**

Participants in a national panel are provided the opportunity to respond, but have full control of whether or not they accept the opportunity to participate.

5. **Describe the provisions that are made to allow adequate time to exchange information and questions between the investigator and participant.**

Contact information is provided on the information sheet with all elements of consent and participants can email NORC/AmeriSpeak, the investigators, or the Utah IRB with any questions prior to participation. There would be the possibility that the opportunity to participate will have passed due to other people electing to participate prior to a potential participant having their question answered.

6. **Will a legally authorized representative (LAR) be used?**

☐ Yes ☒ No

7. **Will a language other than English be used to obtain consent?**

☐ Yes ☒ No

8. **Are you requesting that documentation of informed consent be waived by the IRB (a consent process in place, but no documentation of consent, e.g. questionnaire cover letter, web-based consent, consent without signature, etc.)?**

☒ Yes ☐ No

If yes, complete the following:

- a. **Explain why the waiver of consent documentation is being requested.**

The study is minimal risk, primarily asking about people's perceptions of cancer screening information in addition to a few self-reported questions related to their personal health and health history. No identifying information is being collected and having a signed consent form would be the most likely risk for a breach of confidentiality.

- b. **Justification for the waiver is one of the following:**

The research presents no more than minimal risk of harm to subjects and involves no procedures for which written consent is normally required outside of the research context.

--

5. Data Monitoring Plan

- 1. Privacy Protections:** Privacy refers to persons and to their interest in controlling access of others to themselves. Privacy can be defined in terms of having control over the extent, timing and circumstances of sharing oneself (physically, behaviorally, or intellectually) with others. **What precautions will be used to ensure subject privacy is protected?**

Select all that apply:

The research intervention is conducted in a private place

The collection of information about participants is limited to the amount necessary to achieve the aims of the research, so that no unneeded information is being collected

Allowing for anonymous submission of surveys and questionnaires

Other or additional details (specify):

- 2. Confidentiality Precautions:** Confidentiality is an extension of the concept of privacy; it refers to the subject's understanding of, and agreement to, the ways identifiable information will be stored and shared. Identifiable information can be printed information, electronic information or visual information such as photographs. **What precautions will be used to maintain the confidentiality of identifiable information?**

Select all that apply:

Storing research data on password protected computers or in locked cabinets or offices

Complete de-identification of study data

Other or additional details (specify):

- 3. Will photos, audio recordings, or video recordings, or medical images of participants be made during the study?**

☐ Yes ☒ No

If yes, describe the recording/images and what will become of them after creation (e.g., shown at scientific meetings, stored in the medical/research record, transcribed, erased, etc.):

N/A

- 4. How will study data and documentation be monitored throughout the study?**

Select all that apply:

Confirmation that all appropriate information has been reported to the sponsor, oversight agencies (such as the FDA), and/or IRB

Other additional details (specify):

N/A

- 5. Who will be the primary monitor of the study data and documentation?**

Select all that apply:

Principal Investigator

Other or additional details (specify):

6. How often is study data and documentation monitoring planned (e.g., monthly, twice a year, annually, after N participants are enrolled, etc.)?

After all participants have been enrolled and de-identified data have been received from the survey vendor.

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6. Risks and Benefits

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6. Risks and Benefits

1. Describe the reasonable foreseeable risks or discomforts to the participants:

There are no risks related to the study beyond those people may otherwise experience in their everyday lives.

2. Describe the potential benefits to society AND to participants (do not include compensation):

There are no direct benefits to participants. The benefits to society would be improved recommendations about how to design and select health messages to promote cancer screening and other recommended health behaviors.

3. Are there any costs to the participants from participation in research?

☐ Yes ☒ No

If yes, specify:

N/A

4. Is there any compensation to the participants?

☒ Yes ☐ No

a. If yes, answer the following:

Specify overall amount:

The specific amount is not known to us for each participant, as it connects to previous agreements between the survey vendor and their panel members.

b. Specify when participants will be paid (e.g. at each visit, at end of study, etc.):

At end of study

c. If applicable, please specify payment by visit or other time interval (e.g. \$10 per visit, etc.):

N/A

d. If applicable, explain plan for prorating payments if participant does not complete the study:

N/A

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7. HIPAA & the Covered Entity

PI: Andy King PhD

Submitted: 9/27/2024

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7. HIPAA and the Covered Entity

1. Does this study involve Protected Health Information (PHI) or de-identified health information?

☐ Yes ☒ No

Does this study involve any of the following:

2. The investigational use of a drug?

☐ Yes ☒ No

Mark yes, for an expanded access application.

3. The investigational use of a medical device or humanitarian use device?

☐ Yes ☒ No

Mark yes, for an expanded access application.

4. The investigational use of a dietary supplement, food, or cosmetic?

☐ Yes ☒ No

5. Is this an investigator-initiated drug or device trial lead by the Principal Investigator?

☐ Yes ☒ No

All investigator-initiated drug or device trials are required to have a full research protocol attached to the Documents and Attachments page.

6. Will this study involve the use of an imaging modality from the department of Radiology?

☐ Yes ☒ No

7. Exposure to radioisotopes or ionizing radiation?

☐ Yes ☒ No

8. Genetic testing and/or analysis of genetic data?

☐ Yes ☒ No

9. Creating or sending data and/or samples to a repository to be saved for future research uses?

☒ Yes ☐ No

10. Are you:

- Collecting samples of blood, organs or tissues from participants for research purposes;
- Introducing Recombinant or Synthetic Nucleic Acids (e.g. viral vectors, oligonucleotides) or cells containing recombinant nucleic acids (e.g. CAR-T) into participants; OR
- Introducing other biological materials (e.g. bacteria, viruses) into participants.

☐ Yes ☒ No

11. Does this study involve any of the following?

- Cancer Patients
- Cancer Hypothesis
- Cancer risk reduction
- Cancer prevention

☒ Yes ☐ No

12. Any component of the Clinical and Translational Science Institute (CTSI)?

☐ Yes ☒ No

The Clinical Research Unit (CRU)?

☐ Yes ☒ No

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- Data & Tissue Banking

PI: Andy King PhD

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Data & Tissue Banking

1. Select the items that will be banked:

Data

List all the specific, participant information (identifiable and non-identifiable) that will be contributed to the repository (e.g., name, date of birth, phone number, age, gender, diagnosis, treatment status, outcome, date of collection, etc.):

Only de-identified data will be shared/uploaded to an online data repository like OSF.

2. What type(s) of future research will be allowed on the data/samples?

Any future research or checking of past research that people want to perform on the de-identified data.

3. Who manages the repository and where will the data/samples be stored?

The Open Science Foundation (OSF) manages their repository; the PI will also maintain copies of the uploaded, de-identified data to upload to another database if OSF were to eventually go down.

4. Indicate whether the data/samples in the repository will be identifiable directly or through a code/link.

a. Select one of the following options:

OPTION 3: All data/samples will be de-identified to all individuals who have responsibilities to manage or oversee the repository. No link or code will be accessible to or maintained by the repository.

c. If you selected OPTION 2 or 3 above, describe the process for de-identifying the data/samples:

Who will de-identify the data/samples?

The data provided by NORC/AmeriSpeak will not include any identifying information. As such, we will only provide de-identified data.

When will the data/sample be de-identified?

Prior to being delivered to us by the vendor.

5. Describe the procedures for participants to withdraw their data/samples from the repository. If participants will not be able to withdraw their samples, please provide an explanation:

Withdrawal of data from the repository is not possible because the data will not include identifying information for us to remove individual cases by request.

6. Will future research results or findings be communicated to the participants?

☐ Yes ☒ No

7. Describe the procedures for other researchers to obtain data/samples from the repository for use in future research.

Researchers will be able to download the data on demand from OSF.

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8. Resources and Responsibilities

PI: Andy King PhD

Submitted: 9/27/2024

Title: Social Media and Cancer Screening Information

8. Resources and Responsibilities

1. * State and justify the qualifications of the study staff:

The PI has been conducting health communication research studies for almost 20 years. I have worked together with the survey vendor previously on the study prior to this one that was approved and conducted here at the University of Utah. This study is the final project to complete studies for an R01-equivalent grant awarded to me in 2021.

2. * Describe the training that study staff and investigators will receive in order to be informed about the protocol and understand their research-related duties and functions:

Both myself and my graduate student (Yi Liao) are CITI trained and have extensive methodological and analytical training to contribute to the planning and preparation of this study with the survey vendor. As noted elsewhere, the survey vendor will be the only person with any direct contact with any participants (unless a potential participant would reach out with a question about the study).

3. * Describe the facilities where the research activities will be performed (e.g. hospitals, clinics, laboratories, classrooms/schools, offices, tissue banks, etc.).

Online.

4. * Describe the medical or psychological resources available at this site (and other participating sites, if applicable) that participants might require as a consequence of the research. If not applicable, please state.

N/A

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Documents and Attachments

PI: Andy King PhD

Submitted: 9/27/2024

Title: Social Media and Cancer Screening Information

Documents and Attachments

If any of your documents (such as investigational brochures, sponsor protocols, advertisements, etc.) are not available in an electronic format, please scan and save them as PDF files or contact our office for assistance.

Naming Documents: Please use the title field to clearly indicate the content of each form. The name you enter will be listed on your approval letter. Use names that will differentiate from earlier versions.

Examples:

Consent Document Control Group 04/14/05

Consent Document Treatment Group 4/14/05

Sponsor Protocol 04/14/05 Version 2

Assent Document(Highlighted Changes)

[Apple/Macintosh Users:MS Word documents must have a .doc file extension. See ERICA home page for instructions.](#)

Print View: IRB Draft Protocol Summary

eProtocol Summary:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Consent Documents, Consent Cover Letters, Consent Information Sheets, Consent Scripts, etc.:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Parental Permission Documents:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Assent Documents:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

VA Consent Documents:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Surveys, Questionnaires, Interview Scripts, etc.:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Full Protocol (company protocol, sponsor protocol, investigator-initiated protocol, etc.):

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Investigational Brochure (IB) for Investigational Drug or Drug/Device Package Insert:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Grant Application:

The Federal Government is a direct or indirect sponsor of your research. You are required to provide a copy of the grant proposal, grant award, or sub-award.

By submitting to the IRB, you are confirming the grant and the study protocol are consistent (Design, Study Population, Study Objectives and Goals, Test Interventions and Procedures, etc.)

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Literature Cited/References:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Principal Investigator's Scholarly Record (CV/Resume):

Name	Version	Date Created	Date Modified	Date Approved
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 [King CV.pdf\(0.01\)](#) 0.01 9/29/2022 1:24 PM 9/29/2022 1:24 PM

Faculty Sponsor's Scholarly Record (CV/Resume):

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Other Stamped Documents:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Recruitment Materials, Advertisements, etc.:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

Other Documents:

Name	Version	Date Created	Date Modified	Date Approved
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There are no items to display

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IRB_00183491 - HCI PRMC

PI: Andy King PhD

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Title: Social Media and Cancer Screening Information

HCI PRMC



Huntsman Cancer Institute Protocol Review and Monitoring Committee (PRMC) New Project Cover Sheet

HCI Clinical Trials Office
PRMC@hci.utah.edu
(801) 585-6746

Date: 9/23/2024 9:54 AM**Principal Investigator:** Andy King**Department:** HCI GENERAL RESEARCH**Site Staff and Enrollment:**

Site Name	Investigator	Staff	Enrollment Number
University of Utah	Andy King	Yi Liao	0

Title: Social Media and Cancer Screening Information

The PRMC is charged with the review of the scientific merit, priorities, and progress of cancer research at the University of Utah.

Multicenter Study:

No

Project Funding:

Sponsor	Sponsor Type	Sponsor Contact Information	Prime Sponsor	Prime Sponsor Type	OrgID
View NIH NATIONAL CANCER INSTITUTE	Federal Government				11259

1. Clinical Research Category (Select One):

Observational (OBS)

2. Primary Purpose of the Research (Select One):

Prevention (PRE)

3. Study Source (Select One):

Externally Peer-Reviewed: R01s, SP0RES, U01s, U10s, P01s, CTEP, or any other clinical research study mechanism supported by the NIH or affiliate organizations (click HELP button for a full list)

4. **Study Model Code (Select One):**
Cohort
5. **Time Perspective Code (Select One):**
Cross-Sectional
6. **Have project statistics been reviewed by a statistician:**
Yes
7. **How will accrual and demographic information be tracked:**
REDCap
8. **Does this study target a Rare Disease (meaning it targets a cancer with an incident rate of = < 3 per 100,000 per year):**
☐ Yes ☒ No
9. **Number of subjects to be enrolled at the University of Utah in year 1:**
0
10. **Estimated number of potentially eligible subjects seen at the University in the past year:**
0
11. **Source of data (e.g. CTRG estimate, cancer registry, clinic stats, TriNetX etc.):**
AmeriSpeak/NORC
12. **Estimated time (in months) for full accrual at the University of Utah:**
0
13. **Department overseeing this research:**
HCI Population Sciences Trials Office (PSTO)

Comments:

PSTO handed over my last "trial" to CTO. I don't care who handles it, but I'm uncertain which box to check so I've checked PSTO as I believe they are supposed to handle this trial even though CTO handled my previous trial related to this grant (see: <https://clinicaltrials.gov/study/NCT06134089>).

Also, I checked "REDCap" for how accrual/demographic data will be tracked--but the vendor will track these data on our behalf.

This is a social science experiment that just barely qualifies as a clinical trial, and I have a survey vendor collecting the data, so a call might be the easiest way to discuss this trial with CTO after PRMC review. Thanks!

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IRB Smart Form - Read Only

PI: Andy King PhD

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Information

Sponsor Information

a. Sponsor:

NIH NATIONAL CANCER INSTITUTE

b. Sponsor Contact Information:

Address, phone number, fax number used for event reporting and study correspondence.

c. If the funding type is "Federal Agency, or federal flow through", provide the following information:

Grant Number:

Grant Awardee (Institution and Investigator):

Effective Start Date:

Effective End Date:

If the grant has been awarded to the University of Utah, please attach a copy of the grant application to the Documents and Attachments page.

d. Are you working on this study with the University of Utah Office of Sponsored Projects to obtain this funding?

Yes

If no, please explain:

A contract with the Office of Sponsored Projects may be required even if you are not receiving direct funds. Any relationship with an outside entity should be discussed with OSP:

Main Campus OSP: **801.581.6903**

UUHSC OSP: **801.581.8949**

VAMC OSP: **801.582.1565 x4866**

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Finish

PI: Andy King PhD

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Finish Instructions

Finish Instructions

1. To view errors, select the "Validate" option at the top-left of the page. If you have errors on your application, you won't be able to submit it to the IRB.
2. Selecting the Finish button will NOT submit the application to the IRB.
You MUST select the "Submit" option on the workspace once you've selected the "Finish" button.
3. If your study has a faculty sponsor: Once the PI submits the application, it will be sent to the faculty sponsor for final approval. The IRB cannot review the study until the faculty sponsor submits the application to the IRB.