INFORMED CONSENT OF PARTICIPANTS

Pathologic Characterization of Degenerative Myelopathy

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Principal Investigator
University of Missouri

I. Purpose of Research

The purpose of this study is to study the disease progression of degenerative myelopathy in dogs. We will further characterize the disease features in the central (spinal cord and brain) and peripheral nervous systems. DNA will be banked and pedigree data collected from affected dogs and family members while maintaining anonymity so that it will be available for future gene mapping studies.

II. Expected Duration of Participation

Your dog's participation in this study will consist of a necropsy examination (i.e., a postmortem examination of internal organs).

III. Description of Procedures

Dogs with a presumptive diagnosis of DM as established by conventional diagnostic evaluations (myelography / special imaging (MRI) of the spine) at the MU Veterinary Health Center or another referral hospital will be considered for the study.

A blood sample (5 ml) will be taken from the jugular vein for DNA isolation and storage.

Euthanasia and Donation for an Autopsy:

Dogs that participate in this study will be brought to the MU Veterinary Health Center or another participating practice for necropsy at the time of euthanasia. A thorough examination of your dog's spinal cord, brain and nerves, at the time of death is necessary to confirm the diagnosis of degenerative myelopathy and to identify any co-existing disease. After the necropsy (i.e., visual examination) is completed, your dog will be cremated. If the necropsy is performed at the MU VHC, we can make special arrangements for an individual private cremation. Microscopic examination of tissue samples collected during the necropsy will be done subsequently and you will receive the results of the final diagnosis. Tissues will also be stored appropriately and made available to other laboratories/researchers for additional studies of DM.

IV. Possible Discomforts and Risks

Non-invasive tests (i.e. neurologic examination) and minimally-invasive tests (i.e. collecting blood samples) are associated with minor discomforts and minimal risks of causing consequential harm. An intravenous catheter will be placed in a front or back leg to facilitate injection of sedative and euthanasia solution.

V. Possible Benefits of Participation

The individual animal will receive no benefit.

VI. Alternative to Treatment

Not applicable

VII. Extent and Confidentiality of Records

Your dog's participation in this study will remain confidential in that your name and your dog's name will not be included in any data that is forwarded to the sponsor of the study and data that is used for publication purposes.

VIII. Compensation or Therapies for Injuries

This study does not provide compensation or treatment for any accidental injuries that may occur while the dog is a participant.

IX. Contact Persons for the Study

To obtain more information regarding this study contact:

Dr. Joan R. Coates (Principal Investigator)
Department of Veterinary Medicine and Surgery
900 E. Campus Drive, Clydesdale Hall
College of Veterinary Medicine
University of Missouri
Columbia, MO 65211
(573) 882-7821
CoatesJ@missouri.edu

X. Terms of Participation

Participation in this study is voluntary. Refusal to participate does not alter the care to which the patient is entitled. The results of the study are dependent on histopathologic evaluation of the spinal cord. You will be informed the autopsy results but the report may take several weeks to be completed.

XI. Termination of Participation by the Investigators

The principal investigator, Dr. Joan R. Coates, has the right to terminate the study at any time.

XII. Unforeseen Risks

Not applicable

XIII. Financial Obligations

The study will pay up to $500 for necropsy. If the necropsy is performed at the MU VHC the private cremation will be compensated. The amount of expenditure and compensation may vary in amounts for an independent case. The payment may take several weeks for processing.

XIV. Animal Care and Use Committee Contact Person

The current Director, MU Animal Care Quality Assurance Office
Jeff Henegar, Ph.D.
Director, Animal Care Quality Assurance
Comparative Medicine
57 McReynolds Hall
University of Missouri
Columbia, MO 65211
Phone: 573-882-3681

I have read this paper about the study or it was read to me, and my questions about its content have been answered. I have had an opportunity to ask questions about the project and understand that I can ask questions at any time. I understand the possible risks and benefits of this study. I know that participation in this study is voluntary. *I choose to allow my dog(s), Named*

_____,

to participate in this study and to provide follow-up information as requested by the investigators.

Furthermore, I agree to donate to Dr. Joan R. Coates tissues removed from my dog during the necropsy procedure. I understand that these tissues will be used for other studies of canine degenerative myelopathy and ALS and will be shared with other investigators. I also understand that by signing this Consent Form, I give up all future claims to these tissues and any experimental results that may be derived from their investigational use. I know I can stop participating in this study and my dog will still receive the usual veterinary care. I will get a copy of this consent form. If I have any questions or problems which I feel are related to the study, I can contact the Principal Investigator whose name is on this form.

By signing below I agree to participate in this research study.

Signature: _____ Print Name _____ Date _____
Owner or Agent

Consent form explained by: _____ Print Name _____Date_____

__ In person __ By telephone __ By electronic mail

Investigator _____ Date _____

My dog's gender is ___Male ___Female

My dog is spayed or neutered ___Yes (on _____) ____No

My dog's date of birth was (mm/dd/yyyy) _____

AKC Registration # _____

Your Contact Information for follow-up:

Name: _____

Address: _____

_____

Phone: _____

Email: _____

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