

## VOLUNTARY CONSENT STATEMENT

Military X Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, JOHN L. SPREITZER, having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive (~~intravenously~~) orally on 2 occasions a small quantity of ascorbic acid each containing 20 microcuries of Carbon 14. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following \_\_\_\_\_, or mental disease, to the best of my knowledge.

2 SEPT. 1964  
DATE

John L. Spreitzer  
SIGNATURE

John W. Balsinger  
SIGNATURE OF WITNESS

## APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

James E. Hansen Lt Col USAF  
PROJECT LEADER

Ia

VOLUNTARY CONSENT STATEMENT

Military X Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, ENZY E. McCURE JR. having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive ( (intravenously) on 2 occasions orally ) a small quantity of ascorbi acid each containing 20 microcuries of carbon 14. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following \_\_\_\_\_, or mental disease, to the best of my knowledge.

2 Sept 64  
DATE

Enzy E. McCure Jr.  
SIGNATURE

Daniel G. German  
SIGNATURE OF WITNESS

APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

Samuel J. Hamner M.D. Col USA  
PROJECT LEADER

I a...

VOLUNTARY CONSENT STATEMENT

Military X Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, John L. Prew, having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive ( (intravenously) on 2 occasions orally ) a small quantity of ascorbic acid each containing 20 microcuries of carbon 14. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following \_\_\_\_\_, or mental disease, to the best of my knowledge.

2 Sept -64  
DATE

John L. Prew  
SIGNATURE

[Signature]  
SIGNATURE OF WITNESS

APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

[Signature]  
PROJECT LEADER

IA

VOLUNTARY CONSENT STATEMENT

Military X Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, D.A. WIESZCZCINSKI, having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive (~~intravenously~~) orally on 2 occasions a small quantity of ascorbic acid each containing 20 microcuries of carbon 14. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following \_\_\_\_\_, or mental disease, to the best of my knowledge.

2 Sept. 64  
DATE

D.A. Wieszczcinski  
SIGNATURE

Robert Gayon  
SIGNATURE OF WITNESS

APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

James J. Francis, M.D.  
PROJECT LEADER

VOLUNTARY CONSENT STATEMENT

Military  Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, Jerome Precht, having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive ( ~~intravenously~~ <sup>or 2 occasions</sup> orally ) a small quantity of ascorbic acid containing 20 microcuries of carbon 14. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following none, or mental disease, to the best of my knowledge.

2 Sept 1964  
DATE

Jerome A. Precht  
SIGNATURE

Adolf A. Stuebel  
SIGNATURE OF WITNESS

APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

James E. Hansen (The Vic)  
PROJECT LEADER

I b

VOLUNTARY CONSENT STATEMENT

Military X Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, Alton Thurman, having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive ( intravenously ) <sup>on 2 occasions</sup> orally a small quantity of ascorbic acid salt containing 20 microcuries of carbon 14. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following \_\_\_\_\_, or mental disease, to the best of my knowledge.

2 Sept 1964  
DATE

Alton Thurman  
SIGNATURE

Wm A. Anderson  
SIGNATURE OF WITNESS

APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

James S. Hansen  
PROJECT LEADER

III a

VOLUNTARY CONSENT STATEMENT

Military  Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, Henry B. Marshall, having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive (~~intravenously~~) on 2 occasions (orally) a small quantity of ascorbic acid each containing 20 microcuries of Carbon<sup>14</sup>. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following \_\_\_\_\_, or mental disease, to the best of my knowledge.

2 Sept 64  
DATE

5/14 Henry B. Marshall  
SIGNATURE

5/14 Robert S. Dancy  
SIGNATURE OF WITNESS

APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

James E. Hansen (Hansen)  
PROJECT LEADER

VOLUNTARY CONSENT STATEMENT

Military X Military Patient \_\_\_\_\_ Civilian \_\_\_\_\_ Civilian Patient \_\_\_\_\_

I, Stephen S. Edwards, having the capacity to consent, voluntarily and without force or duress consent to participate in research involving the use of tracer amounts of radioisotopes. I have been informed of, and understand, the nature, duration, and purpose of the experiment, the method and means by which it is to be conducted, the inconveniences and hazards to be expected, and the effects upon my health and person which may possibly come from participation in the experiment.

Specifically, I agree to receive (~~intravenously~~) on 2 occasions orally a small quantity of ascorbic acid containing 20 microcuries of carbon 14. I also agree to furnish urine and stool samples for the period following until no detectable radioactivity is present and submit to measurements of expired gases if Carbon-14 has been received.

I understand that I may at any time during the course of the experiment revoke my consent and withdraw from the experiment without prejudice.

I do not at this time have any physical diseases, except for the following NONE, or mental disease, to the best of my knowledge.

2 September 1964  
DATE

Stephen S. Edwards  
SIGNATURE

Richard B. Hudson  
SIGNATURE OF WITNESS

APPROVAL

I have personally ascertained that the quality of the foregoing consent is sufficient to permit the volunteer to participate in the experiment.

\_\_\_\_\_  
ATTENDING PHYSICIAN

James S. Hudson  
PROJECT LEADER