

Boston, June 10, 2013

Dear Colleague,

We are happy to include your patient in our mutation analysis in single-gene causes of kidney disease. Thank you for your interest!

In March 2013, my lab has moved to the Boston Children's Hospital (BCH)/Harvard Medical School. Principally, the ongoing projects have not changed. However, before we can offer mutation analysis for your patient, we need to enroll you in our updated IRB (Institutional Review Board) protocol. Therefore, we kindly ask you to do the CITI training (on the internet). We tried to make this process as easy for you as possible. Please, see the below step-by-step instructions.

Thank you very much for your collaboration.
Feel free to contact us with any further questions.

Yours sincerely,

Friedhelm Hildebrandt

Friedhelm Hildebrandt, MD

Warren E. Grupe Professor of Pediatrics
Harvard Medical School
Chief, Division of Nephrology
Investigator, Howard Hughes Medical Institute
Boston Children's Hospital
Enders 561
300 Longwood Avenue
Boston, Massachusetts, 02115

Please, do the following before sending DNA/blood samples:

1. CITI-Training:

Please complete the CITI training at www.citiprogram.org.

For further instructions regarding the CITI Training please see the slides below. Email the CITI-Training **CERTIFICATE** to mutation@renalgenes.org. We then will email you the consent form so that you can go ahead and consent the patient/parents.

2. Shipping:

Upon email request we will send you our FedEx account number for cost free shipping of your sample(s). Please email the tracking number of your shipment to us. You will receive an email to confirm your shipment arrived safely at our Lab.

3. Back-reporting results:

We are not allowed to report negative results of mutation analysis findings to you due to IRB regulations. Therefore, please let the families know if you don't hear from us, we have not found the disease-causing mutations. However, if we find the disease-causing mutation (and the patients/parents wish to be informed) we will ask for an additional blood sample to initiate a CLIA-certified specific mutation conformation (SMC). There will be no cost for you or the participating families.

Please feel free to contact us with any further questions.

Thank you for your interest!

Dear Collaborator

If you **don't** have a
CITI username and password yet
please follow the instructions below.

If you **already** have a **CITI login** please
affiliate with Children's Hospital of Boston
before enrolling in our Basic Course.

(jump to page 17 of this presentation)

Register first

USA - English Text Size: A A Log In | Register | Help

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Over 5.0 million CITI Program courses have been completed since 2000

Username

Password
 Log In

Forgot Username or Password?

Create an account

Access requires registration
subscribing CITI institution
unaffiliated learner.

Click Register

CITI Program Announcements

- Using the New CITI Program Website (August 2013)
- CITI Program Quarterly Newsletter (July 2013)
- Updated Responsible Conduct of Research Content (June 2013)
- New Human Subjects Research Refresher Courses (April 2013)
- CITI Program Quarterly Newsletter (March 2013)
- New Module for Site Administrators: Using CITI Program Content (February 2013)
- Are You Thinking About Participating in a Research Study? Read CITI's Module for Research Participants (January 2013)
- More...

Help & Support

- How do I register?
- Merge duplicate accounts
- I forgot my Username or Password
- More...

Use Children's Hospital of Boston please NOT Harvard

CITI - Learner Registration

Steps: **1** 2 3 4 5 6 7

*** Select An Institution**

* indicates a required field.

Choose your institution from the appropriate dropdown menu. Choose **only one** institution. If you are affiliated with more than one institution, you will be able to select additional institutions after providing the information required.

Participating Institutions

- Children's Healthcare of Atlanta
- Children's Hospital & Research Center Oakland
- Children's Hospital Central California
- Children's Hospital Los Angeles (CHLA)
- Children's Hospital of Boston**
- Children's Hospital of Orange County
- Children's Hospital of Philadelphia
- Children's Hospitals and Clinics of Minnesota
- Children's National Medical Center
- Children's Oncology Group (COG)
- Christiana Care Health System
- Christie Clinic
- Christopher Newport University
- CIDEIM (Centro Internacional de Entrenamiento e Investigaciones Médicas)
- CITI - Biosafety Demonstration Course
- CITI - Georgia
- CITI China
- CITI Demo for WHO / PAHO
- CITI US Export Control Regulations DEMO
- CITI-Ukraine

I am not affiliated with a participating institution. I would like to register with CITI as an independent learner. (Fees apply.)

My institution is not listed as a participating institution. [Click here for information on how to subscribe as a participating institution.](#)

[Continue to Step 2](#) **Click to continue**

Complete and Continue to Step 3

CITI - Learner Registration

Steps: 1 **2** 3 4 5 6 7

Personal Information

* indicates a required field.

* First Name	* Last Name
<input type="text"/>	<input type="text"/>
* Email Address	* Verify email address
<input type="text"/>	<input type="text"/>

If you have a secondary email address that can be used in case your preferred email address changes, enter it below.
If you forget your username or password, it will be mailed both to your preferred email address and your secondary email address.

Secondary email address	Verify secondary email address
<input type="text"/>	<input type="text"/>

[Continue to Step 3](#) ← **Click to continue**

Pick Username and Password and continue to Step 4

CITI - Learner Registration

Steps: 1 2 **3** 4 5 6 7

Create your Username and Password

* indicates a required field.

Your username should consist of 4 to 50 characters. Your username is not case sensitive; "A12B34CD" is the same as "a12b34cd". Once created, your username will be part of the completion report.

* User Name

Your password should consist of 8 to 50 characters. Your password IS case sensitive; "A12B34CD" is not the same as "a12b34cd".

* Password * Verify Password

Please choose a security question and provide an answer that you will remember. **NOTE: If you forget your login information, you will have to provide this answer to the security question in order to access your account.**

* Security Question

* Security Answer

[Continue to Step 4](#)  [Click to continue](#)

Please complete and continue to Step 5

CITI - Learner Registration

Steps: 1 2 3 **4** 5 6 7

Gender, Ethnicity and Race

Why does CITI Program ask about your gender, race and ethnicity? ⓘ
Why does CITI Program use these categories? ⓘ
Why does CITI Program ask about your gender? ⓘ

* Indicates a required field.

*** Your Gender Is:**

Male
 Female
 I would rather not disclose

*** Your Ethnicity Is: (You may choose only one)**

Hispanic or Latino ⓘ
 Not Hispanic or Latino
 I would rather not disclose

*** Your Race Is: (You may choose more than one)**

American Indian or Alaska Native ⓘ
 Black or African American ⓘ
 Asian ⓘ
 Native Hawaiian or Other Pacific Islander ⓘ
 White ⓘ
 I would rather not disclose

[Continue to Step 5](#) ← **Click to continue**

Please complete and continue to Step 6

CITI - Learner Registration

Steps: 1 2 3 4 **5** 6 7

* indicates a required field.

*** Are you interested in the option of receiving Continuing Education Unit (CEU) credit for completed CITI Program courses?**

If you answer "yes", you will be provided with information before you start a CEU-eligible course about the amount of credit available, information about the course authors, and other required CEU disclosures. This information **must** be viewed before a course is started in order for you to be eligible to purchase CEU credit after course completion. However, answering "yes" does not obligate you to purchase CEU credits for any course.

If you answer "no", you will not see information about the CEU credits available for courses before you start them or after completing them, and you will be **ineligible** for CEU credit for these courses. You can change this preference at any time by clicking on a "CEU Information" link or using a "My Profile" link to update your Profile.

If you're not sure, you can change your answer later.

Yes
 No
 Not sure. Ask me later

If you answered "yes", please check all the types of CEU credit that may be of interest. This information allows us to ensure that you receive appropriate Pre- and Post-Course information relevant to the kind(s) of CEU credit that you may request.

AMA PRA Category 1 Credits
 Nurses (CNE Credits)
 Other
 Psychologists (CEP Credits)

*** Can CITI Program contact you at a later date regarding participation in research surveys?** ⓘ

Yes
 No
 Not sure. Ask me later

[Continue to Step 6](#)  [Click to continue](#)

Please complete Step 6

CITI - Learner Registration

Steps: 1 2 3 4 5 **6** 7

Please provide the following information requested by Children's Hospital of Boston

* indicates a required field.

Language Preference

* Institutional email address

* Gender

* Highest degree

Employee Number

Please complete Step 6 and continue to Step 7

* Department

* What is your role in research?

Address Field 1

Address Field 2

Address Field 3

City

State

Zip/Postal Code

Country

* Office Phone

* CH ID Number

Home Phone

CH ID Number: Use "0"

[Continue to Step 7](#)

Click to continue

Enroll in Basic Course

CITI - Learner Registration

Steps: 1 2 3 4 5 6 **7**

Select Curriculum - Children's Hospital of Boston

* indicates a required field.

You will be provided a series of enrollment questions. Your responses will determine the curriculum for the courses you are going to take. Please read the questions carefully. Please read the responses carefully to make the best choice. [Click here](#) to review the Children's Hospital of Boston instructions page.

Question 1

Are you registering for the initial Basic Training Course or for the Refresher Course (required every three years)?

Choose all that apply

A. Follow the link to enroll in the [Basic Course](#) or,

B. Follow this link to enroll in the [Refresher Course](#)

Question 2

Question 2: If you are enrolling in the Basic Course, what is your role in the conduct of human subject research at Children's Hospital Boston? (choose one or more groups for your "Basic Course")

Choose all that apply

Biomedical Researcher or research staff who interacts with human subjects

Social/Behavioral Researcher or research staff who interacts with human subjects

Make your choice, then scroll down to "Continue"

Researcher or research staff who does not interact with human subjects

Basic Course

Biomedical Researcher

Answer Questions 3 to 6 with **NO** or **N/A** and Complete Registration

Question 3

Are you registering for the Refresher Course (required every three years)?

Choose all that apply

- Refresher for Biomedical Researcher or research staff who interacts with human subjects
- Refresher for the Social/Behavioral Researcher or research staff who interacts with human subjects
- Refresher for Researcher or research staff who does not interact with human subjects.
- No, I have NOT completed the Basic Course previously, follow the link to choose a response to Question 2, OR Continue below.

Question 4

If you want to take Good Clinical Practice (GCP) please make your selection below.

This GCP course does NOT satisfy the IRB basic training requirement for Boston Children's Hospital; it only counts toward IRB continuing education credit. For the IRB-required basic human subjects training, enroll in Basic Course listed in question #1 above.

Choose one answer

- Good Clinical Practice
- N/A

*** Question 5**

If you want to take Responsible Conduct of Research (RCR) please make your selection below.

This RCR course does NOT satisfy ANY IRB training requirements for Boston Children's Hospital. For the IRB-required human subjects training, enroll in a different course above.

Choose one answer

- Responsible Conduct of Research Course
- N/A

Question 6

Would you like to take the Conflict of Interest mini-course?

Choose one answer

- Yes
- No

[Complete Registration](#)

Answer NO

Answer N/A

Answer N/A

Answer NO

Click to complete

You will receive an email to confirm your email address

Citiprogram-noreply@med.miami.edu

to [REDACTED]

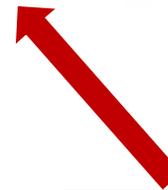


Thank you for registering with the Collaborative Institutional Training Initiative (CITI Program).

To confirm your email address and complete your registration, please click on the link below:

[https://www.citiprogram.org/index.cfm?pageID=183&email=\[REDACTED\]&id=3646647](https://www.citiprogram.org/index.cfm?pageID=183&email=[REDACTED]&id=3646647)

Thank you
Collaborative Institutional Training Initiative (CITI Program)



**Click to confirm
your email address**

Your email has been validated

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✔ Thank you. Your email has been validated and your registration complete. [Click here](#) to log into your CITI account.

Click here



Login



USA - English

Text Size: A A

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[Returning User? Please log in. Don't have an account? Click here to register](#)

Login Tips:

1. Your password is case-sensitive.
2. For institutions using Single Sign On (SSO), you must log in directly from the institution web page. [Click here for a list of institutions that use SSO.](#)

Help for Login Issues:

[I forgot my Username or Password](#)
[I did not get the validation email](#)
[The link in my email does not work](#)

If you need more help, please contact our [Help Desk](#).

**Login with your
Username and Password**

Username

Password

[Log In](#)

[Forgot Username or Password?](#)

Create an account

[Register](#)

Access requires registration as an affiliate of a subscribing CITI institution or as an unaffiliated learner.

Start the Course

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Main Menu

▼ Children's Hospital of Boston Courses

Course	Status	Completion Report	Survey
Group 1.Biomedical	Not Started	Not Earned	

My Learner Tools for Children's Hospital of Boston

- Add a Course or Update Learner Profile
- View Previously Completed Coursework
- Update Institution Profile
- View Instructions page
- Remove Affiliation

▶ Click here to affiliate with another institution

Start the Course by clicking on it

Please send a **PDF** of your
Completion Record to

mutation@renalgenes.org

Thank You!

If you **already** have a **CITI login**

Please **login** and **affiliate** with
Children's Hospital of Boston
before enrolling in our Basic Course

Login



USA - English

Text Size: A A

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Affiliate with another Institution

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Click here

Use Children's Hospital of Boston please NOT Harvard

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- Children's Hospital of Boston**
- Children's Hospital of Orange County
- Children's Hospital of Philadelphia
- Children's Hospitals and Clinics of Minnesota
- Children's National Medical Center
- Children's Oncology Group (COG)
- Christiana Care Health System
- Christie Clinic
- Christopher Newport University
- CIDEIM (Centro Internacional de Entrenamiento e Investigaciones Médicas)
- CITI - Biosafety Demonstration Course
- CITI - Georgia
- CITI China
- CITI Demo for WHO / PAHO
- CITI US Export Control Regulations DEMO
- CITI-Ukraine

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My institution is not listed as a participating institution. [Click here for information on how to subscribe as a participating institution.](#)

[Continue to Step 2](#) **Click to continue**

Now follow the **steps described** on **page 4 to 11** of this presentation to **enroll** in our **Basic Course**

Start the Course

by Clicking on it in the Main Menu

Please send a **PDF** of your
Completion Record to

mutation@renalgenes.org

Thank You!