



UNIVERSIDAD DE PUERTO RICO, RECINTO DE CIENCIAS MÉDICAS  
UNIVERSITY OF PUERTO RICO, MEDICAL SCIENCES CAMPUS



OFICINA DEL RECTOR  
OFFICE OF THE CHANCELLOR

COMITE DE DERECHOS HUMANOS (IRB)  
INSTITUTIONAL REVIEW BOARD

**Date:** August 23, 2013

**Protocol Number:** 1250313

**Principal Investigator:** Dr. Esther A. Torres

**Department / Division:** School of Medicine - Department of Medicine

**Sponsor:** Ponce School of Medicine and Health Sciences

**Title:** *Vitamin D levels and colonic expression of VDR in Inflammatory Bowel Disease*

Thank you for your response to requests from a prior **full board review** of your application. This is to confirm that your application is now fully approved. In compliance with federal regulations, the approval for this study is valid through: **August 23, 2013 to August 23, 2014.**

This action involves:

New

The following documents were reviewed under this submission:

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Protocol   | <input checked="" type="checkbox"/> Curriculum Vitae     |
| <input checked="" type="checkbox"/> Informed Consent Document<br>English and Spanish Version | <input checked="" type="checkbox"/> HIPAA Certified      |
| <input checked="" type="checkbox"/> Survey Instrument  | <input checked="" type="checkbox"/> Authorization Letter |
| <input checked="" type="checkbox"/> Human Subject Certified                                  | <input checked="" type="checkbox"/> HIPAA Identifiers    |

**Remember:**

- According to UPR Policies, if a proposed Project involves a component of research that falls under the jurisdiction of the Biosafety, Institutional Animal Care and Use and /or Radiation Safety Committees approval must be obtained from the appropriate Compliance Office.

For additional information please contact Human Research Subjects Protection Office at 787-758-2525 exts. 2510 to 2515; e-mail [oppi.rcm@upr.edu](mailto:oppi.rcm@upr.edu).

Cordially,

María del Rosario González, MD  
Chairperson IRB 1

bcg

1. Research must be conducted according to the proposal that was approved by the IRB.
2. Changes to the protocol or its related consent document must be approved by the IRB prior to implementation
3. All serious or unexpected adverse events/drug reactions should be reported.
4. Each subject should receive a copy of the consent document, if appropriate.
5. Records must be retained for at least three years.
6. Any future correspondence should include the IRB identification number provided and the study title.

PO Box 365067, San Juan, Puerto Rico 00936-5067 Tel. / Phone (787) 758-2525, Exts. 2510 - 2515

**Patrono con Igualdad de Oportunidades en el Empleo M/M/V/I**

Equal Employment Opportunity Employer M/W/V/M