Older Adult Research (OAR) Registry

If you are age 50 or older, we invite you to enroll in the OAR registry managed by the Center for Gerontology. The OAR registry is used to connect researchers with older adults interested in being part of aging research.

Opportunities as a research participant may come available with studies that focus on topics such as individual health conditions and concerns, computer use and technology, family relationships and caregiving, health care and community services, housing, and transportation.

Selection for each study will be based on information you provide at registration. If you are selected, it will be your decision as to whether or not you decide to participate.

If you would like to be included in the OAR registry, simply fill out the attached registration form and return it to the Center or submit it electronically through our website at www.gerontology.vt.edu

Join Us and Help ‘Invent the Future’!
Older Adult Research (OAR) Registry

You are invited to participate in the Older Adult Research (OAR) registry - a database that contains information about adults (age 50+) interested in participating in research projects. The OAR registry is used to connect researchers with older adults willing to take part in research studies. By enrolling in the OAR registry, you can make yourself available as a potential participant for future studies.

PROCEDURES: If you would like to be included in the OAR registry, please complete a registration form. Listed on the form are 20 questions about yourself including your name, age, contact information, health status, and caregiving responsibilities. It should take you less than 2 minutes to complete the form.

Your responses will be entered into the OAR registry database. If your responses match the characteristics of participants needed for a particular project, your name and contact information will be given to the Virginia Tech researcher leading that study. In turn, he or she will contact you and give you information about the project. It will be your decision as to whether or not you decide to participate. The only information the OAR registry will receive back from researchers is whether or not you agreed to participate. To protect you against any unforeseen burdens and demands on your time, your name will not be provided to researchers if you are already enrolled in 2 or more studies.

Volunteering for the OAR registry does not guarantee that you will be recruited for a study. Your name will be kept active in the registry unless you notify us that you no longer wish to participate. After five years, if you have not participated in a study, you will be contacted and asked if you would like to remain in the OAR registry. If you wish to remain, you will be asked to update your information. If you wish to have your name removed, your information will be deleted from the registry.

POTENTIAL RISKS AND DISCOMFORTS: There are no more than minimal risks in providing the information requested beyond what would be expected in everyday life. The information you provide will not be sold or distributed to persons or entities outside of the Center.

BENEFITS: You may feel a sense of altruism, or giving back to the community, by participating in the OAR registry. Society may benefit by having you participate in aging-related research projects.

CONFIDENTIALITY: Information you provide will be kept confidential. Your information will be stored with a code number; your name will not be linked to it until you are recruited to participate in a study.

COSTS AND PAYMENTS: There is no cost to you for participating in the OAR registry. You will not receive any form of compensation for registering.

RIGHT TO WITHDRAW: Participation in the OAR registry is voluntary. You are free to choose the questions you wish to answer. You can withdraw your name and information at any time by contacting the Center for Gerontology by phone (540-231-7657), email (gero@vt.edu), or mail Center for Gerontology, Virginia Tech, 237 Wallace Hall (0426), Blacksburg, VA 24061.

FINANCIAL CONSIDERATIONS: Neither the Center for Gerontology Director, Karen A. Roberto, nor the Center staff, are receiving financial incentives for developing or maintaining the OAR registry.

APPROVAL OF RESEARCH: This registry has been approved, as required, by the Institutional Review Board for Research Involving Human Subjects at Virginia Tech.
| **Name** | ________________________________ | **Age** | __________________ |
| **Street Address** | __________________________________ | **City** | __________________ |
| **State** | ________ | **Zip code** | ________ | **County** | __________ |
| **Phone** | ___________________________ | **Email** | __________________ |

**How would you like us to contact you about studies?** (Mark all that apply)

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<th>Mail</th>
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**If you were asked to join a study, would you be willing to …**

- have a researcher visit your home?  Yes  No
- be interviewed over the telephone?  Yes  No
- complete a questionnaire mailed to you?  Yes  No
- complete an on-line survey?  Yes  No
- travel to the VT campus in Blacksburg?  Yes  No

**Please tell us more about yourself by marking the responses that best describe you:**

**Sex:**  Male  Female

**Race:**  White/Caucasian  Black/African American  Asian  Other (specify) _______ 

**Are you Hispanic or Latino?**  Yes  No

**Who lives with you?** (Mark all that apply)

| I live alone  | Spouse/Partner  | Child  | Grandchild  | Other (specify) _______ |

**Has a doctor ever said that you have any of the following health conditions?** (Mark all that apply)

- Arthritis  Asthma  Cancer  COPD  Chronic Pain
- Depression  Diabetes  Heart Disease  High BP  Memory Loss
- Migraines  Neuropathy  Obesity  Stroke  Osteoporosis

**Other (specify) ____________________________________________

**Are you a caregiver?**  Yes  No

**If yes, for whom?** (Mark all that apply)

| Spouse/Partner  | Child  | Grandchild  | Friend  | Other (specify) _______ |

**Does the person(s) you care for have memory problems?**  Yes  No

**If yes, has a doctor said it is…** (Mark all that apply)

- Mild Cognitive Impairment (MCI)  Alzheimer’s Disease  I Do Not Know