

Hello and Welcome to Duke University,

This letter is to welcome you to the Ph.D. program and to inform you about an important event during Orientation week. Please read it carefully, complete the attached RSVP form, and return it to Trish McCoy by July 15 ([trish.mccoy@duke.edu](mailto:trish.mccoy@duke.edu)).

Since the 1990s, the National Institutes of Health (NIH), the National Science Foundation (NSF), and the Duke Graduate School require all graduate students to learn about ethics in science and the Responsible Conduct of Research (RCR). In response, the basic science departments of Duke University offer an annual course in research ethics (RCR Orientation, GS310B) at the Duke University Marine Laboratories, in Beaufort, North Carolina, which will be held on **Friday, August 25** through **Sunday, August 27, 2006**. This weekend follows orientation activities during the preceding week, so you should already be on campus by then. Information about the ethics retreat can be found at <http://www.cmb.duke.edu/ethics/index.html>. The RCR orientation course is required for all Ph.D. students in the basic medical sciences, for which they receive official university transcript credit. To achieve the required 18 hours of RCR training each student must attend the RCR Orientation (12 hours) at Beaufort and subsequent RCR Forums (2 hour events) during the academic year. Please review the RCR degree requirement information at [http://www.gradschool.duke.edu/policies\\_and\\_forms/responsible\\_conduct\\_of\\_research/](http://www.gradschool.duke.edu/policies_and_forms/responsible_conduct_of_research/)

The Duke Marine Lab is located in Beaufort, North Carolina -- a charming coastal town, about 175 miles and four hours from Durham. Offering this ethics course as a retreat allows students to focus on important issues of scientific conduct without the distractions of course work and the laboratory. In addition, you will meet about 100 of your newly arrived colleagues, graduate students and faculty from many departments and programs. In the past, most students have evaluated the "Beaufort experience" as a very positive introduction to graduate school.

#### **Transportation:**

Students are required to travel **by bus** to the Marine Labs. Plan to meet at 10:30AM on Friday, August 25 at the PGIII parking garage at the corner of Fulton street and Pratt Avenue (see <https://aux03.auxserv.duke.edu/parking/campusmap/campusmap.htm> for a map to the garage.) If you are planning to park in the garage, enter through the Patient/Visitor Entrance and park in the garage. Parking will be free; gates will be up when you leave on Sunday. The buses will be loading on the street in front of the garage. If it is not possible to take the bus for some unusual reason, please contact me ([pende014@mc.duke.edu](mailto:pende014@mc.duke.edu)) or Trish McCoy ([trish.mccoy@duke.edu](mailto:trish.mccoy@duke.edu)). A bag lunch and bottled water will be provided for the bus trip. **The buses will leave PROMPTLY at 11:30AM.**

#### **RCR Course Organization and Preparation:**

The course is organized around a series of short lectures and group discussions. You will be assigned to a small group of 10 or so students to explore issues raised by the lecturers. Faculty and student leaders facilitate group discussions, but your participation is paramount. All students should read the New Yorker article by Daniel J. Kevles, *The Assault on David Baltimore*, prior to the course (see attached). This article describes a well-known case of alleged scientific misconduct, and it will be discussed in one of our small group sessions. Because the article is copyrighted, it is not available on the ethics retreat website. A hard copy of the article will be in the folder that you will receive on the bus to Beaufort, so that you can read it on the bus.

#### **Guest Speakers:**

As guest speakers this year we have Dr. Joan Lakoski, Professor of Pharmacology and Assistant Vice-Chancellor for Academic Development at University of Pennsylvania and Chair of the Ethics Advisory Committee for the Endocrine Society, who will provide a keynote lecture, and Dr. Eric Ward of CropSolution, who will discuss genetically modified foods.

#### **Housing & Meals:**

Student housing will be provided at the Beaufort campus. Linens will be provided. All meals and a variety of snacks will be provided throughout the Beaufort weekend trip. If you have special dietary needs, please e-mail me ([pende014@mc.duke.edu](mailto:pende014@mc.duke.edu)) or Trish McCoy ([trish.mccoy@duke.edu](mailto:trish.mccoy@duke.edu)).

**What to Bring:**

*You should bring personal items such as:*

- Soap, shampoo, & toiletries
- beach towels
- swimsuits
- hat
- closed boat shoes
- sun screen
- insect repellent
- any personal medications.

**Two Options for Saturday afternoon** (select one on RSVP form), 12:30-4:00pm

***Trip A: Shackelford Banks Island by Boat***

- Shackelford Banks, a barrier island near the Marine Lab, is well known for its wild horses, excellent shelling and ideal ocean swimming. The trip to and from the island takes about 20 minutes by boat. Don't be surprised to get wet while on the boat! From the boat landing, we hike for about 10 minutes across the dunes to the beach. The hike is easy, but it can be very hot. There is no shade on Shackelford Island, so don't forget your hat and sunscreen. (*Sandals are NOT permitted on the boat trip.*)

***Trip B: Visit to NC Maritime Museum***

- For those who do not wish to spend the afternoon on Shackelford, we have arranged for a tour of the North Carolina Maritime Museum located in Beaufort. It offers interesting exhibits of North Carolina history, wildlife, and mid-Atlantic seafaring.

Again, please complete and return the RSVP form to Trish McCoy by July 15, 2006. We prefer the RSVP via e-mail, although via fax or mail is acceptable. While some of you may have already informed your department or program of your intentions, it is important to RSVP directly to Ms. McCoy. Also, please inform Ms. McCoy if your address changes over the summer and list alternative telephone numbers and e-mail addresses that will allow us to contact you.

Finally, welcome to graduate school and Duke University. All faculty, students, and staff look forward to your arrival and will gladly help you to begin a career in research and scholarship. Please do not hesitate to contact me with any questions or concerns about the course. I look forward to meeting every new student and to another productive, interesting, and fun retreat at Beaufort.

Sincerely yours,

*Ann Marie Pendergast*

Ann Marie Pendergast  
Professor of Pharmacology and Cancer Biology

**RSVP FORM**  
**Beaufort Course in Research Ethics**  
**Friday – Sunday ▪ August 25 - 27, 2006**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Phone Number in Durham (if applicable): \_\_\_\_\_

I **will** attend the course in Research Ethics

I have a personal conflict and will contact Dr. James at [douglas.james@duke.edu](mailto:douglas.james@duke.edu).

Saturday Afternoon Optional Trip (select one):

I will take the optional boat trip to Shackleford Island on Saturday Afternoon

I will take the optional trip to the Maritime Museum on Saturday Afternoon

Housing Preference:

I would prefer housing with students who are “early to bed” rather than “late nighters”

***Please return this form by JULY 15 to:***

Trish McCoy  
Dept of Pharmacology and Cancer Biology  
Box 3813 DUMC  
Durham NC 27710  
phone: (919) 613-8637  
fax: (919) 681-1005  
e-mail: trish.mccoy@duke.edu

**GS310B: Responsible Conduct of Research  
Beaufort Retreat  
August 25 – 27, 2006**

**Friday August 25:**

10:30 – 11:30am	Load buses in front of PGIII
11:30am	Leave PROMPTLY for Beaufort
4:00pm	Arrive at Marine Lab
4:00pm – 5:00pm	Check in
5:30pm	Dinner
6:30pm	Welcome – Dr. Ann Marie Pendergast
6:40pm	Introduction to the Marine Lab – Dr. David McClay
6:50pm	Foundation and Values in Science – Dr. David McClay
7:20pm	Keynote Address: "On Being an Ethical Scientist" – Dr. Joan Lakoski
8:30pm	Breakout Sessions
9:30pm	Boathouse Special

**Saturday August 26:**

7:45am	Breakfast
8:45am	Misconduct in Research – Dr. Ann Marie Pendergast
9:15am	Image Manipulation: Avoiding Misconduct – Dr. Sally Kornbluth
10:00am	Coffee Break
10:30am	Ethics vs. Professional Custom – Dr. Angela Holder
11:00am	How Allegations of Misconduct are Handled at Duke – Dr. Joe Corless
12:00pm	Receive boxed lunches and load the boat to Shackleford Island
4:20pm	Return from Shackleford Island
5:30pm	Allocation of Credit and Authorship – Dr. Rob Wechsler-Reya
6:15pm	Professional Obligations of a Scientist – Dr. Scott Soderling
6:45pm	Breakout Groups
7:45pm	Pig Pickin'

**Sunday August 27:**

7:30am	Load luggage onto buses
7:45am	Breakfast
8:45am	Ethical Research on Animals – Dr. Laura Hale
9:15am	Genomic Medicine, Ethics and Policy – Dr. Geoffrey Ginsburg
9:50am	Breakout Groups
10:30am	The Public and Genetically Modified Foods – Dr. Eric Ward
11:30am	Course Evaluations
11:45am	Pick up boxed lunches and load buses
12:00pm	Depart for Durham

## **DUKE UNIVERSITY PARTICIPATION AGREEMENT**

You have requested to participate in a retreat on August 25-27, 2006 to the Beaufort Marine Lab in Beaufort, NC. This activity is sponsored by the Graduate School of Duke University. All activities associated with travel involve risks and it is important for you to have information about this activity and to provide [Trish McCoy](#) with information about yourself before participating in this activity. The Participation Agreement must be read carefully and signed by all participants who take part in the activity offered by the Graduate School.

### **PLEASE READ THIS AGREEMENT CAREFULLY.**

IT IS A LEGAL CONTRACT AND AFFECTS ANY RIGHTS YOU MAY HAVE IF YOU ARE INJURED OR OTHERWISE SUFFER DAMAGES WHILE PARTICIPATING IN THIS ACTIVITY.

**In consideration of Duke University allowing me to participate in this activity, I agree and understand the following:**

- 1. Nature of Travel: I understand that I will be traveling to Duke's Marine Lab located in Beaufort, North Carolina via chartered bus services provided by Holiday Tours. However, should I choose to drive my personal vehicle instead of taking the transportation provided by the Graduate School, I understand the University's position on student drivers and will follow the rules that have been set by the University. I also acknowledge that should I be involved in an automobile accident, my personal auto insurance policy will provide coverage for the accident.**
- 2. Inherent Risks and Dangers of Travel: I understand and appreciate that risk and dangers are inherent when traveling long distances. I understand that not following procedures correctly could result in property damage and personnel injury, including death. I agree to accept and assume all risks associated with the activity whether present or future, known or unknown, arising from or as a result of, my voluntary participation in the activity. Understanding all of the risks involved, I hereby elect to voluntarily participate.**
- 3. Behavior Expectations of the Participant: I know that it is important to follow the directions of the activity leader at all times. I understand that as a participant I have the responsibility to help make the activity a safe experience for all participants through appropriate behavior and conduct. I also understand the danger associated with deviating from the planned activity and agree not to deviate from the plans as stipulated in the procedures.**
- 4. Health Condition of the Participants: By signing this participation agreement you agree:**
  - ❖ To furnish the faculty advisor health information.**
  - ❖ To inform the faculty advisor of any medication, ailment, condition, or injury that may affect your performance in the activity**
  - ❖ That Participant will bear all financial responsibility for any medical treatment arising from participation in the activity.**
  - ❖ I understand that the University reserves the right to make cancellations, changes or substitutions in cases of emergency or changed conditions or in the interests of the group.**
  - ❖ I understand that as a participant in this Duke University program, I am a representative of Duke University. By signing this agreement, I pledge to conduct myself in a manner, which reflects favorably on all.**

- ❖ **I understand that Duke University requires all participants to be covered by appropriate health and accident insurance and those participants and their families must be financially responsible for all medical expenses and for expenses related to evacuation and repatriation unless otherwise provided. In addition, I understand that payment for medical expenses customarily is advanced and reimbursement sought later from the insurance carrier. Duke University also recommends that participants insure their property against loss or theft.**

5. RELEASE, ASSUMPTION OF RISK, WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

In return for Duke University allowing me to participate in this activity and having read and understood this Participation Agreement, I hereby state that I voluntarily agree to the following:

A. I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the Graduate School of Duke University, its trustees, officers, employees or agents, (hereinafter referred to as RELEASEES) for any liability, claim, and/or cause of action arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me that occurs as a result of my traveling to and from, and participation in this activity.

B. I agree to INDEMNIFY AND HOLD HARMLESS the RELEASEES whether injury or damages is caused by my negligence, the negligence of the RELEASEES or the negligence of any third party from any loss, liability, damage or costs, including court costs and attorneys' fees, that RELEASEES may incur due to my traveling to and from, and participation in this activity.

C. It is my express intent that this RELEASE and HOLD HARMLESS AGREEMENT shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISHCARGE and COVENANT NOT TO SUE the above-named RELEASEES.

D. I hereby further agree that this Participation Agreement, Release, Assumption of Risk, Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the state of North Carolina.

E. If I deviate from any aspect of this activity, such deviation is purely voluntary, and I agree that RELEASEES shall not be liable for any injuries resulting or arising out of such deviation.

F. I understand that by participating in this activity I will ASSUME THE RISK of injury and damage from risks and dangers that are inherent in any activity – in particular, the opportunity to swim in the ocean without a life guard present.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT that I have read the foregoing PARTICIPATION AGREEMENT, understand it, and sign it voluntarily.

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian (if participant is under the age of 18)

\_\_\_\_\_  
Date

# DUKE MEDICAL INFORMATION FORM

## PARTICIPANT INFORMATION

Participant's Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Permanent Address \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

## MEDICAL EMERGENCY CONTACT INFORMATION

Person to Contact First:

Backup Contact (Relative or Friend):

Name \_\_\_\_\_ Name \_\_\_\_\_

Relation to Participant \_\_\_\_\_ Relation to Participant \_\_\_\_\_

Daytime Phone ( ) \_\_\_\_\_ Daytime Phone ( ) \_\_\_\_\_

Evening Phone ( ) \_\_\_\_\_ Evening Phone ( ) \_\_\_\_\_

Are you allergic to any medications? \_\_\_\_\_

List current perscriptions/medications \_\_\_\_\_

## INSURANCE POLICY INFORMATION

Are you covered by health insurance? \_\_\_\_\_

Policy Holders Name \_\_\_\_\_ Policy Holders Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Relation to Participant \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Occupation \_\_\_\_\_

Employers Address \_\_\_\_\_

Insurance Company Name \_\_\_\_\_

Insurance Company Address \_\_\_\_\_

Policy # \_\_\_\_\_ Plan # \_\_\_\_\_