

UBC Providence Health Care Research Ethics Board

Providence Health Care Research Institute 1081 Burrard St, Vancouver, BC V6Z 1Y6

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UBC PROVIDENCE HEALTH CARE RESEARCH ETHICS BOARD MEMBERSHIP LIST

Name of Institution: The University of British Columbia

UBC Federal Wide Assurance Number for U.S. government studies: FWA0000668 – Expiry January 31, 2017.

*All members are voting members. A quorum comprises a minimum of five separate members from groups 1-4, with:

- at least two members with broad expertise in biomedical research (Scientific)
- 2. at least one member knowledgeable in the ethics of scientific research
- at least one member knowledgeable in law relevant to scientific research
- 4. at least one member from the community who has no affiliation with the institution
- 5. at least one member whose specialty is non-scientific
- 6. at least one member knowledgeable in therapeutic natural health products (ad hoc, for quorum only for review of therapeutic natural health products)

UBC PHC REB VOTING MEMBER Gender/Canadian Citizen or Permanent Resident of Canada		REB POSITION (Alternate Designation)	HIGHEST DEGREE (S) EARNED	PRIMARY SCIENTIFIC or NON SCIENTIFIC SPECIALITY	PHC /UBC AFFILIATION	QUOROM DESIGNATION*
1	Dr. Kuo-Hsing Kuo Male/Yes	Voting Member Chair	MD PhD	Pharmacology	Yes	1,2
2	Dr. Ingrid Fedoroff Female/Yes	Voting Member Associate Chair	PhD, R.Psych	Pain Management	Yes	1, 2
3	Dr. Jill Kernahan Female/Yes	Voting Member Associate Chair	BSc MD C.C.F.P.	Family Medicine	Yes	1,2
4	Dr. Eve Aymong Female/Yes	Voting Member	MD MSc FRCP(C)	Cardiovascular	Yes	1,2
5	Dr. Boris Feldman Male/Yes	Voting Member	MD	Psychiatry	Yes	1
6	Ms. Annemarie Kaan Female/Yes	Voting Member (Alternate for #15 and 16)	MCN RN CCN(C) CTNC	Clinical Nurse Specialist, Heart Failure VAD/Transplant	Yes	1,2
7	Mr. Michael Kleisinger Male/Yes	Voting Member	LL.B	Law	No	3
8	Dr. Stephen Hoption Cann	Voting Member	PhD	Epidemiology	Yes	1, 2
9	Dr. David Unger Male/Yes	Voting Member	MD CCFP FCFP Dip Sport Med Bioethics	Medicine, Ethicist	Yes	1, 2
10	Dr. Quincy Robyn Young Female/Yes	Voting Member	PhD R. Psych	Cardiac Psychology	Yes	1,2
11	Dr. Farzin Forooghian Male/Yes	Voting Member	MD, MSc, FRCSC	Ophthalmology	Yes	1,2
12	Ms. Bonnie MacKenzie Female/Yes	Voting Member	Diploma Electronic Data Processing	Community Member	No	4, 5

13	Dr. Adrienne Melk Female/Yes	Voting Member	MD, MPH	General and Endocrine Surgery	Yes	1,2
14	Dr. Robert Boone Male/Yes	Voting Member	MSc (Epi) MD FRCPC	Cardiology	Yes	1,2
Alterna	ates					
15	Dr. Martha Mackay Female/Yes	Voting Member (Alternate for #6 and 16)	PhD, RN, CCN (C)	Clinical Nurse Specialist, Cardiology	Yes	1,2
16	Ms. BelindaAnn Furlan Female/Yes	Voting Member (Alternate for #6 and 15)	BScN, MSN, NP(F), CCN (C)	Nurse Practioner, Cardiology	Yes	1
17	Ms. MaryEllen Gillan Female/Yes	Voting Member ((Alternate for #12))	MA	Community Member	No	4, 5
18	Ms Katherine Saunders	Voting Member (Alternate for #7)	LL.B	Law	No	3
19	Ms. Sarah Harbottle Female/Yes	Member (Alternate for #7)	LL.B	Law	No	3
UBC P	HC REB Ad Hoc Members				·	
20	Dr. Thomas Kerr Male/Yes	Member	PhD	HIV/AIDS	Yes	1
21	Dr. Ardis Krueger Female/Yes	Member	BA ND	Naturopathic Medicine	No	1, 6
22	Dr. Stephen Pinney Male/Yes	Member	MD, FRCSC, MDMC	Orthopedics	Yes	1,2
23	Ms. Patricia Lauridsen-Hoegh Female/Yes	Member	BSN, LL.B	Nursing, HIV/AIDS	Yes	1
24	Dr. Nadia Khan Female/Yes	Member	MD FRCPC MSc	Internal Medicine	Yes	1,2
25	Dr. Manoj Raval Male/Yes	Voting Member	MD MSc	General Surgery	Yes	1,2

The changes reflected in this document are:

Removed:

Ms Nassim Adhami Ms. Rika Moorhouse

Moved to Ad Hoc: Dr. Manoj Raval

Added:

Dr. Stephen Hoption Cann

For all research conducted under the assurance, the UBC Providence Health Care Chair hereby attests that, except where specifically waived or altered by the REB under 45 CFR 46.115 (c), 46.117 (c), the REB will uphold the requirements of 45 CFR 46 for written informed consent, in non-exculpatory language understandable to the subject (or the subject's legally authorized representative).

AS UBC PHC REB CHAIR, I HEREBY SO ATTEST:

SIGNATURE:

PRINTED NAME: Dr. Kuo-Hsing Kuo

DATE: 06-March-13

PHONE: 604-682-2344 ext 63496

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