## Title of research study: DUET: Dual United Event-Based Timelines (IRB # 24-559)

## Principal Investigator:

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## Key Information: The following is a short summary of this study to help you decide whether or not to be a part of this study. More detailed information is listed later on in this form.

The purpose of this study is to get a better understanding of how security camera operators currently search for specific events over long periods of time and how the new system that we designed can assist them in the search process. This study is a two-hour-long session where we will simply ask you about your experiences and opinions with the current software that you use and then have you answer some questions by completing tasks with the interface that we developed. The following sections contain more detailed information.

## Detailed Information: The following is more detailed information about this study in addition to the information listed above.

## Who can I talk to?

If you have questions, concerns, or complaints, or think the research has hurt you, talk to the research team at [*andyluu@vt.edu*](mailto:andyluu@vt.edu)

This research has been reviewed and approved by the Virginia Tech Institutional Review Board (IRB). You may communicate with them at 540-231-3732 or irb@vt.edu if:

* You have questions about your rights as a research subject
* Your questions, concerns, or complaints are not being answered by the research team
* You cannot reach the research team
* You want to talk to someone besides the research team to provide feedback about this research

## How many people will be studied?

We plan to include about 15-30 people in this research study.

## What happens if I say yes, I want to be in this research?

* The researchers will provide a survey that should take about one and a half-hour long to complete.
* During the survey, we will ask you about your experiences with the current security camera software that you use to view events that occur in the area that you patrol.
* Afterward, you will be asked to answer questions by completing a set of tasks using a system that we created that has publicly available security camera footage with events throughout that footage and five different timeline visualizations to navigate through those events in the video.

## What happens if I say yes, but I change my mind later?

You can leave the research at any time, for any reason, and it will not be held against you.

If you decide to leave the research, contact the investigator so that the investigator can delete any of the information about you that we collected.

## Is there any way being in this study could be bad for me? (Detailed Risks)

There are no known risks to participating in this study.

## What happens to the information collected for the research?

We will make every effort to limit the use and disclosure of your personal information, including research study and medical records, only to people who have a need to review this information. We cannot promise complete confidentiality. Organizations that may inspect and copy your information include the IRB, Human Research Protection Program, and other authorized representatives of Virginia Tech.

The results of this research study may be presented in summary form at conferences, in presentations, reports to the sponsor, academic papers, and as part of a thesis/dissertation.

## Can I be removed from the research without my OK?

The person in charge of the research study or the sponsor can remove you from the research study without your approval. Possible reasons for removal include: if we have reason to believe you do not meet the eligibility requirements (i.e., are not a security camera operator or related occupation that views long hours of video footage with event-based data)

## What else do I need to know?

If you agree to take part in this research study, you will receive a $30 Amazon Gift Card for your time and effort.

***ELECTRONIC CONSENT***

*Please read the consent form above. Checking the following box or saying one of the following phrases acts as your signature and documents your permission to take part in this research.*

|  |  |
| --- | --- |
|  | I consent to participate in this research. |
|  | I do NOT consent to participate in this research. |