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Policy Statement

As an institution committed to the creation of new knowledge through research, The Johns Hopkins University (“University” or “JHU”) seeks to ensure integrity in the design, conduct and reporting of research results. Misconduct in research endangers public trust and the pursuit of scientific truth, and the University has an obligation to deal promptly with allegations or evidence of research misconduct. These procedures provide a fair and orderly means of handling allegations or suspicions of research misconduct, in compliance with applicable federal regulations for research institutions. The University Research Integrity Policy (“Policy”) applies to all University faculty, trainees, students and staff engaged in the proposing, performing, reviewing or reporting of research, regardless of funding source.
This Policy does not apply to allegations or complaints that do not fall within the definition of research misconduct set forth below or to matters that fall exclusively under other policies, including violations of conflict of interest policies, violations of Institutional Review Board or Institutional Animal Care and Use Committee policies, or violations of fiscal or other University policies, which shall be directed to the offices responsible for such matters. Where an allegation includes matters that may be partly within the scope of this Policy and also within the scope of another policy, the Research Integrity Officer shall coordinate as necessary with other offices.

It is not intended that proceedings under this Policy be adversarial. Rather, all phases of the procedure should be conducted in the spirit of peer review. As a peer review activity, committees of the faculty should be free to meet directly with a member of the academic community regarding matters raised under this Policy, without legal counsel present. No Complainant, Respondent or witness may appear before these internal review committees with legal counsel.

**Purpose**

This Policy sets forth the policies and procedures to be followed in reporting, assessing, inquiring into, and investigating allegations of research misconduct. This Policy is intended to comply with the regulatory requirements of federal funding agencies related to research misconduct.

**Definitions**

| **Allegation** | A disclosure of possible research misconduct through any means of communication directly to a Deciding Official or the Research Integrity Officer (“RIO”) or to the Deciding Official or RIO via other University or School officials. |
| **Complainant** | A person who makes a good faith allegation of research misconduct. |
| **Deciding Official** | Under this Policy, the deciding official is the Dean (or the Dean’s designee) of the school in which the Respondent has his or her primary appointment or employment. Where an allegation is brought that involves a Deciding Official as a potential Respondent or witness, the RIO shall consult with the Provost, who shall appoint a non-conflicted Deciding Official for such matter. |
| **Evidence** | Any document or data in any medium (including but not limited to electronic and digital files), tangible item, or testimony offered or obtained during a research misconduct proceeding that tends to prove or disprove the existence of an alleged fact. The destruction, absence of, or |

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1 The applicable regulations include 42 C.F.R. Part 93 (for Public Health Service funded research), 45 C.F.R. Part 689 (for National Science Foundation funded research), 14 C.F.R. Part 1275 (for National Aeronautics and Space Administration funded research), EPA Order 3120.5, issued March 16, 2006 (for Environmental Protection Agency funded research), DoD Instruction No. 3210.7, issued May 14, 2004 (for Department of Defense funded research), 70 Fed. Reg. 66371 (for Department of Education funded research), DOT Implementation Guidance, issued February 2002 (for Department of Transportation funded research), 68 Fed. Reg. 53861 (for Department of Labor funded research), 70 C.F.R. 37010 (for Department of Energy funded research), National Endowment for the Humanities Research Misconduct Policy (available on the National Endowment for the Humanities website).
Respondent’s failure to provide Research Records accurately documenting the questioned research may constitute evidence of research misconduct.

**Fabrication**

Making up data or results and recording or reporting them.

**Falsification**

Manipulating research materials, equipment or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.

**Good Faith**

1) With respect to a Complainant or witness, having a belief in the truth of one’s allegation or testimony that a reasonable person in the Complainant’s or witness’ position could have, based on the information known to the Complainant or witness at the time. An allegation of research misconduct or testimony in a research misconduct investigation is not considered to be provided in good faith if it is made with knowing or reckless disregard for information that would disprove the allegation or testimony; and

2) With respect to a committee member, carrying out the duties assigned in an honest and impartial manner, free of influence from personal, professional, or financial conflicts of interest which may compromise, or appear to compromise, the committee member’s objectivity.

**Plagiarism**

The appropriation of another person’s ideas, processes, results, or words without giving appropriate credit. Plagiarism does not include authorship disputes.

**Preponderance of the Evidence**

Proof by information, compared with that opposing it, that a matter at issue is more probably true than not.

**Research**

A systematic experiment, study, evaluation, demonstration or survey designed to develop or contribute to general knowledge (basic research) or specific knowledge (applied research) in all fields.

**Research Integrity Officer (“RIO”)**

The person appointed by the Provost who has primary responsibility for implementing this Policy. The RIO may delegate certain duties to School RIOs appointed by the Deciding Official for the relevant School. In such cases, references to RIO in this Policy shall include the School RIO. The RIO shall serve as a non-voting, ex officio member solely to provide procedural guidance to Inquiry and Investigation committees. The RIO shall 1) receive allegations, 2) conduct (in coordination with the Deciding Official) assessments of allegations, 3) ensure that potential evidence of research misconduct is collected and sequestered in a timely manner, 4) ensure that regulatory requirements and timelines are met, 5) ensure that decisions made under this Policy are appropriately documented, 6) maintain confidentiality during the pendency of assessments, inquiries and investigations, and 7) complete all regulatory recordkeeping and reporting obligations set forth in this Policy and applicable federal regulations.
Research Misconduct: Falsification, fabrication or plagiarism in the proposing, performing, reviewing or reporting of research. Research misconduct does not include honest error or differences of opinion. Each of the following must be proven by a preponderance of the evidence to support a finding of research misconduct:

a. There has been a significant departure from the accepted practices of the scientific community; and

b. The misconduct was committed intentionally, knowingly, or recklessly.

Research Record: The record of data or results that embody the facts resulting from scientific and other forms of inquiry, including but not limited to, research proposals, laboratory records (physical or electronic), physical samples, progress reports, abstracts, theses, oral presentations, internal reports, journal articles, and correspondence that transmits data or results.

Respondent: The person against whom an allegation of research misconduct is made.

Policy

1. Obligation to Report and Confidentiality

All members of the University community have an obligation to report good faith suspicions of research misconduct within the scope of this Policy. Allegations should be directed to the RIO, but may also be directed to the department chair or Dean of the responsible unit where the alleged research misconduct occurred. Allegations directed to department chairs or Deans shall be promptly reported to the RIO for purposes of assessment, and the RIO will notify the relevant Dean of any allegations reported directly to the RIO. Allegations that come from outside sources, such as journal editors, funding agencies, or other institutions, shall be directed to the RIO. Individuals are encouraged, but not required, to submit allegations in writing, so that the issues raised may be clearly identified. Anonymous allegations will be assessed, provided that sufficient specific detail or corroborating evidence is provided. Complainants cannot be promised anonymity, but Complainants who raise allegations in good faith will be protected from retaliation, and the University will adhere to applicable federal rules and guidelines regarding the protection of whistleblowers.

Since an allegation of research misconduct, particularly if later determined to be unfounded, may jeopardize a Respondent’s career or reputation, care shall be taken to maintain the confidentiality of proceedings conducted under this Policy. During the pendency of an inquiry or investigation, information should be shared only with persons having a need to know in order to carry out the obligations of this Policy, including notification to responsible agencies in accordance with applicable regulations or where otherwise required by law. Notwithstanding the foregoing, information regarding an allegation may be disclosed by the University at any time, if University officials determine that: 1) the health or safety of the public is at risk, including an immediate need to protect human or animal subjects; 2) government resources or interests are threatened; 3) a determination has been made by the University that research activities should be suspended; 4) federal action is required to protect the interests of those involved in the research misconduct proceeding; 5) the research misconduct proceeding may be made public prematurely so that federal agencies may need to take appropriate steps to safeguard evidence and protect the rights of those involved; or 6) the research community or public should be informed. Where there is a reasonable
indication of possible violations of civil or criminal law, the matter shall be immediately reported to the Office of General Counsel, which will assume responsibility for prompt notification of the appropriate federal and state authorities.

II. Assessment
The RIO, in consultation with the Deciding Official if needed, shall promptly make a preliminary assessment of an allegation to determine whether it falls within the definition of research misconduct, and whether the allegations are sufficiently credible and specific so that potential evidence of misconduct may be identified. If the RIO determines that the allegation does not fall within the definition of research misconduct, but may be a violation of other University policies (e.g., human subject research, conflict of interest, disclosure and professional commitment, or fiscal policies), the RIO shall refer the matter to the appropriate University office or committee. If the RIO determines that the allegation either does not meet the definition of research misconduct, or is not sufficiently credible and specific so that potential evidence of research misconduct may be identified, the RIO may close the matter.

III. The Inquiry
a. Initiation of the Inquiry: At the time of or before beginning an inquiry, the RIO or Deciding Official will notify the Respondent in writing of the allegation and provide a copy of this Policy and the relevant procedures, if any, of the school. The RIO will take all reasonable and practical steps at the time of or before beginning an inquiry to obtain custody of all the relevant research records and the evidence needed to conduct the inquiry, to inventory the records and evidence, and to sequester them in the office of the RIO or another designated, secure location. The Respondent is obligated to cooperate with all requests of the University to obtain this information. Where the research records or evidence encompass scientific instruments shared by a number of users, custody may be limited to copies of the data or evidence on such instruments, so long as those copies are substantially equivalent to the evidentiary value of the information on the instruments.

b. Purpose of the Inquiry and Standard of Review: The purpose of the inquiry is to conduct an initial review of the evidence to determine whether to proceed with an investigation by identifying meritorious accusations and to put quickly to rest frivolous, unjustified, or mistaken allegations. The question is: Do the initial allegations or suspicions warrant investigation? The Inquiry Committee should not normally include deciding whether research misconduct occurred, but should be limited to determining whether there is sufficient substantive evidence of possible Research Misconduct to recommend further investigation.

c. Role of an Advisor: At the beginning of the inquiry process, the Respondent will be afforded the opportunity to consult with an uninvolved senior faculty member, who will serve as advisor to the Respondent throughout the proceedings in accordance with any school level procedures. The role of the advisor will be to offer advice and guidance regarding the procedural aspects of the process. The advisor shall not act as an advocate for the Respondent.

d. Conduct of the Inquiry: In consultation with the RIO, the Deciding Official will appoint one or more members of the faculty, in accordance with School procedures, who do not have unresolved personal, professional or financial conflicts of interest with those involved in the inquiry, and who possess the necessary and appropriate
expertise to evaluate the available evidence regarding the allegation (the “Inquiry Committee”). The Deciding Official shall provide a written charge to the Inquiry Committee, detailing the allegations to be considered by the Inquiry Committee. Every effort will be made to complete the inquiry within 60 calendar days of its initiation. If the inquiry requires longer than 60 days to complete, the record of the inquiry will document the reasons for exceeding 60 days. When the inquiry is completed, a draft report will be prepared by the Inquiry Committee. The RIO will assist the Inquiry Committee with ensuring that their written report states what evidence was reviewed, summarizes relevant interviews (if interviews were conducted), and includes sufficient detail to support the conclusions of the inquiry. The Respondent will be provided a copy of the draft inquiry report and will be given an opportunity to comment on the report. Comments from the Respondent must be received within 14 days of his or her receipt of the draft inquiry report. The final written report of the matter along with any comments received by the Respondent(s) will be submitted to the Deciding Official.

e. **Outcome of the Inquiry:**

   i) **No grounds for conducting an investigation:** If the inquiry determines that an investigation is not warranted, sufficiently detailed documentation of the inquiry must be maintained to permit a later assessment of the reasons for the determination. Efforts to protect or restore the reputation of the Respondent will be made, by the Deciding Official, with the assistance of the RIO, as deemed appropriate and needed. The records of the inquiry will be kept secure by the RIO for seven years. Records will be available to authorized federal personnel upon request if the allegations concern federally supported research.

   ii) **Recommendation to Proceed to Investigation:** If the inquiry concludes that there appear to be grounds for an investigation of research misconduct, the Deciding Official will initiate a formal investigation into the matter and notify the Provost of the pending investigation. If the matter involves federally supported research or an application for federal support, the appropriate federal agency will also be notified by the RIO, as required by federal regulations.

   iii) **Admission by Respondent:** If the Respondent makes a legally sufficient admission of research misconduct at the inquiry stage, an allegation may be closed at the Inquiry stage, provided that all issues raised by the allegation are resolved, and the RIO obtains from the Respondent a written admission that details the specifics of the research misconduct. For research funded by any Public Health Service (“PHS”) agency, the RIO must consult with the U.S. Department of Health and Human Services (“DHHS”) Office of Research Integrity before closing the matter on the basis of an admission.
IV. Investigation

a. Purpose of the Investigation: The purpose of the investigation is to collect and evaluate all relevant evidence of the alleged research misconduct, including research records, documentation, interviews with those involved, and interviews with those knowledgeable about the activities under investigation. This collection and review of evidence is to be thorough, competent, objective and fair.

b. The Initiation of the Investigation: At the initiation of the investigation, the Deciding Official shall inform the Respondent in writing of all the charges against him or her and the fact that an investigation is being initiated. The Respondent must be informed promptly in writing of any amendment to the original allegations that may be identified as the investigation proceeds.

The Respondent will be notified in writing of the names of the members of the Investigation Committee appointed by the Deciding Official to conduct the investigation. The Respondent may request, within five (5) days of receiving that notification, that the Deciding Official replace a member of the Investigation Committee on a reasonable showing of potential bias or conflict of interest. The Deciding Official’s decision as to whether or not to replace a member of the Investigation Committee may not be appealed during the pendency of the investigation, but may be raised as part of an appeal at the conclusion of the matter, as set forth in Section V of this Policy.

c. Conduct of the Investigation: The investigation will be conducted by an Investigation Committee appointed by the Deciding Official, in accordance with procedures of the particular school or University division. The Investigation Committee will consist of three or more faculty members from the Johns Hopkins University or other academic institutions as may be needed to provide the necessary expertise. The Deciding Official shall provide a written charge to the Investigation Committee, detailing the allegations to be considered by the Investigation Committee. Investigation Committee will initiate the investigation within 30 days of the completion of the inquiry and make a good-faith effort to complete all aspects of the investigation within 120 days of its initiation. If the Investigation Committee is unable to complete all aspects of the investigation within 120 days and federal funds are involved, a request for an extension will be made by the RIO to the appropriate federal agency pursuant to applicable regulations. The Investigation Committee will conduct a careful review of the allegations and afford an opportunity for all individuals concerned to present their knowledge and information. The Investigation Committee may consider it necessary to review potential research misconduct beyond that identified in the initial allegations, in which case the Respondent will be informed in writing by the RIO of the additional allegations. If, in the course of the investigation, the Investigation Committee finds reasonable grounds to believe there should be an inquiry into actions of individuals other than the Respondent, the RIO must notify the Deciding Official promptly. At any stage of the investigation, the Deciding Official, after consultation with the Investigation Committee and the RIO, may take steps to notify other parties who, in the Deciding Official’s judgment, should be informed of the ongoing investigation. The Deciding Official will also take interim administrative action as necessary to protect any sponsored project funding and assure that intended purposes of the sponsored research in question are being carried out.
d. **Meetings of the Investigation Committee:** The Investigation Committee will give the Respondent written notification of the place, time, and date of any meeting at which her/his appearance is requested. Every effort will be made to schedule such meetings at a mutually convenient time. Unless waived by the Respondent, no initial meeting with the Investigation Committee will take place less than seven days after he or she receives the Investigation Committee’s request to appear. The Respondent may request a rescheduling of the meeting(s) with the Investigation Committee for good cause. The Respondent’s failure or refusal to meet with the Investigation Committee will not deter the progress of the investigation. If the Respondent is no longer a member of the University community, the requirements of written notice and an opportunity to answer to the charge of misconduct will be observed as far as is practical, but the failure of the Respondent to respond or to make himself or herself available to those with investigatory responsibilities will not deter the investigation. If an advisor has been appointed to advise the Respondent, the advisor may attend meetings if requested by the Respondent, but may not present matters or advocate on behalf of the Respondent.

All testimony to the Investigation Committee by the Respondent or other persons will be recorded and transcribed. Copies of the transcripts will be furnished to the Respondent. All those interviewed may submit corrections of any transcription errors, but may not otherwise edit the transcript.

The Respondent will be allowed to present a written statement at the start of the investigation. He or she may request that the Investigation Committee interview certain individuals with relevant information, and may suggest to the Investigation Committee any avenues of inquiry that he or she believes are likely to produce relevant evidence. The Respondent may submit written questions for the Investigation Committee to present to the Complainant. The Committee may determine that such questions are duplicative or not relevant to the matters at hand, and in such case, may elect not to present the questions to the Complainant.

e. **Investigation Committee Report:** At the conclusion of the investigation, a report will be prepared by the Investigation Committee. The RIO will assist the committee to ensure that the report includes the names of the persons interviewed; a summary of the interviews; a description of the documents, data, and other evidence examined; and the Investigation Committee’s conclusion regarding each of the allegations. The Respondent will be given a copy of the Investigation Committee’s draft report and a copy of, or supervised access to, the evidence on which the report is based. The Respondent may submit comments on the draft report within 14 days of receipt. The RIO may grant Respondent an extension of an additional 7 days in which to submit comments upon good cause shown. The Committee will finalize its report, taking into account any comments from the Respondent if deemed appropriate by the Committee. The Committee will forward its final report and the Respondent’s comments, if any, to the Deciding Official. A copy of the report will be provided by the RIO to the responsible federal agency as required by regulation.

f. **Outcome of the Investigation:**
   i) **No Finding of Misconduct:** If the investigation concludes that research misconduct has not occurred, and if the Deciding Official concurs with these findings, the matter will be closed, with appropriate action taken to restore the
reputation(s) of those under investigation, as deemed appropriate and needed by the Deciding Official, in consultation with the RIO, and continued protection of the Complainant(s) from retaliation. The RIO will retain the records of the investigation, including the findings of the Investigation Committee, in a confidential, sequestered file for a period of seven years. A copy of the Investigation Committee’s findings of no misconduct will be sent by the Deciding Official to the Respondent, and the report and the Deciding Official’s decision will be sent to the appropriate federal agency as required under applicable federal regulation.

ii) **Good Faith Determination:** If, in the judgment of the Investigation Committee, the allegations, however incorrect or unsupportable, were made in good faith, no retaliatory or disciplinary action will be taken against the Complainant(s) and appropriate measures will be taken to protect the Complainant(s) from retaliation. If, with due regard to whistleblower protections, the Investigation Committee finds that the allegations of misconduct were not made in good faith, the Deciding Official may take appropriate disciplinary action against those responsible.

iii) **Finding of Misconduct:** If the Investigation Committee concludes that research misconduct has occurred, it will report its findings and the significance assigned by the Investigation Committee to such findings, to the Deciding Official. The Investigation Committee’s report may include recommendations as to disciplinary and/or corrective action, if consistent with school procedures. The Deciding Official, or his or her designee, may ask questions including with regard to recommendations for disciplinary and/or corrective action (if school procedures contemplate the Investigation Committee making such recommendations) of the Investigation Committee. The Deciding Official will accept or reject the investigation report in whole or in part. Upon acceptance of the report or any part of the report by the Deciding Official, the Deciding Official or any other disciplinary committee established by individual school policy will propose sanctions and/or corrective action which may include any of the following:

a) withdrawal or correction of papers, abstracts, or other publications;
b) notification of journal editors where the research at issue has been published or is under review;
c) notification of sponsoring agencies;
d) termination or alteration of employment status, including periods of supervised probation;
e) postponement or denial of promotion or advancement;
f) release of information about the incident to the public, particularly when public funds were used to support the fraudulent or suspect research; or
g) any other action deemed appropriate to the circumstances.
V. Appeals
The Respondent may appeal the determination of research misconduct in writing to the Provost of the University within 14 days of the Deciding Official’s decision. The Provost’s review of the appeal will be limited to the adequacy of the procedures followed and the appropriateness of the disciplinary action taken, and the Provost shall render a decision on the appeal promptly and inform the Deciding Official of the Provost’s decision.

VI. The Office of General Counsel
The Office of General Counsel will not act as the prosecutor or defender of the Respondent, but will act as an impartial legal advisor to the University. The RIO and Deciding Official may consult with the Office of General Counsel on procedural matters at any step in the proceedings. Any contact or inquiry to the University from attorneys representing any parties in a research misconduct matter, including contacts and inquiries emanating from legal representatives of any federal, state, or local agency, must be referred to the Office of General Counsel. Legal counsel retained by a Respondent must direct any request to interview any university employees to the Office of General Counsel.

VII. Exclusivity of Procedure
This procedure for the determination of misconduct is the exclusive mechanism within the University for adjudication of questions of this nature. The Respondent may not invoke a School’s grievance procedure in an effort to gain a re-adjudication of the charge.

Who is Governed by this Policy
- All units of the university, excluding The Johns Hopkins University Applied Physics Laboratory

Exceptions/Exclusions
This Policy does not apply to allegations or complaints that do not fall within the definition of research misconduct as set forth in this document or to matters that fall exclusively under other policies, including violations of conflict of interest policies, violations of Institutional Review Board or Institutional Animal Care and Use Committee policies, or violations of fiscal or other University policies, which shall be directed to the offices responsible for such matters. Where an allegation includes matters that may be partly within the scope of this Policy and also within the scope of another policy, the Research Integrity Officer shall coordinate as necessary with other offices.
Policy Enforcement

<table>
<thead>
<tr>
<th>Enforcement</th>
<th>The University Research Integrity Officer and Deciding Official (as defined in the Policy) are responsible for the conduct of inquiries and investigations. Disciplinary actions may be taken as outlined in the Policy.</th>
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<tbody>
<tr>
<td>Reporting Violations</td>
<td>All members of the University community have an obligation to report good faith suspicions of research misconduct within the scope of this Policy. For details on the obligation to report and issues related to confidentiality, see Section 1 of this Policy.</td>
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Related Resources

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<th>University Policies and Documents</th>
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<tr>
<td>JHU Statement of Ethical Standards</td>
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<tr>
<td>The Johns Hopkins University and The Johns Hopkins Health System Corporation Policy on Institutional Conflict of Interest</td>
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<td>Johns Hopkins University Policies on Disclosure and Professional Commitment/Conflict of Commitment and Conflict of Interest</td>
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<tr>
<th>External Documentation</th>
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<tbody>
<tr>
<td>Office of Research Integrity, U.S. Department of Health and Human Services</td>
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<tr>
<td>Research Integrity and Administrative Investigations, National Science Foundation</td>
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<th>University Forms and Systems</th>
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<td><a href="https://johnshopkinsspeak2us.tnwreports.com/">https://johnshopkinsspeak2us.tnwreports.com/</a> or 1-844-SPEAK2US (1-844-773-2528)</td>
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Contacts

<table>
<thead>
<tr>
<th>Subject Matter</th>
<th>Office Name</th>
<th>Telephone Number</th>
<th>E-mail/Web Address</th>
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</table>
| Policy Clarification and Interpretation | Office of the Provost | 410-516-8070 | Email: provost@jhu.edu  
Website: http://web.jhu.edu/administration/provost/contact |
<table>
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<th>Subject Matter</th>
<th>Office Name</th>
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<tr>
<td>and Health System Compliance Line</td>
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<tr>
<td>Reporting allegations of research misconduct</td>
<td>Research Integrity Officer</td>
<td>410-516-6880</td>
<td><a href="http://web.jhu.edu/administration/provost/bios/links">http://web.jhu.edu/administration/provost/bios/links</a></td>
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<tr>
<td>Reporting violations of civil or criminal law</td>
<td>Office of the Vice President and General Counsel</td>
<td>410-516-8128</td>
<td><a href="http://web.jhu.edu/administration/general_counsel/">http://web.jhu.edu/administration/general_counsel/</a></td>
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**Web Address For This Policy**

[https://www.jhu.edu/university-policies/#policies](https://www.jhu.edu/university-policies/#policies)