

THE UNIVERSITY OF ADELAIDE HUMAN RESEARCH ETHICS COMMITTEE

**STANDARD CONSENT FORM
FOR PEOPLE WHO ARE SUBJECTS IN A RESEARCH PROJECT**

1. I,(please print name)

consent to take part in the research project entitled:

.....

2. I acknowledge that I have read the attached Information Sheet entitled:

.....

3. I have had the project, so far as it affects me, fully explained to my satisfaction by the research worker. My consent is given freely.

4. Although I understand that the purpose of this research project is to improve the quality of medical care, it has also been explained that my involvement may not be of any benefit to me.

5. I have been given the opportunity to have a member of my family or a friend present while the project was explained to me.

6. I have been informed that, while information gained during the study may be published, I will not be identified and my personal results will not be divulged.

7. I understand that I am free to withdraw from the project at any time and that this will not affect medical advice in the management of my health, now or in the future.

8. I am aware that I should retain a copy of this Consent Form, when completed, and the attached Information Sheet.

.....

(signature)

(date)

WITNESS

I have described to (name of subject)

the nature of the procedures to be carried out. In my opinion she/he understood the explanation.

Status in Project:

Name:

.....

(signature) (date)

