

Informed Consent Statement.

Statement by participant

I have read the foregoing information, and it has been read to me on annual physical exam. I have had the opportunity to ask questions about it and any questions that I have asked have been answered to my satisfaction. I consent voluntarily to participate as a participant in this prospective observation research without any medical intervention. I agree to share results for publication.

Print Name of Participant _____

Signature of Participant _____

Date _____

Day/month/year

Statement by the researcher/person taking consent

I have accurately read out the information sheet to the potential participant, and to the best of my ability made sure that the participant understands that he/she will participate as a participant in this prospective observation research without any medical intervention. He/she agrees to share results for publication.

I confirm that the participant was given an opportunity to ask questions about the study, and all the questions asked by the participant have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

Print Name of Researcher/person taking the consent _____

Signature of Researcher /person taking the consent _____

Date _____

Day/month/year