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NETSCC Health Technology Assessment Programme reference 09/22/136

ISRCTN71327395

### INTERVIEW CONSENT FORM

Please initial each box

1. I confirm that I have read and understood the participant information sheet dated 5<sup>th</sup> October 2010 (version 1.0) for the above study and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason and without my legal rights being affected.

3. I agree to the interview being digitally recorded.

4. I agree to anonymised quotations being used in reports of the study.

5. I agree to take part in the above study.

\_\_\_\_\_  
Name of participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of researcher

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Participant Identification Number

1 for participant; 1 for researcher