OK-Diabetes

Looking after yourself when you have diabetes

UNIVERSITY OF LEEDS

Person ID		
	Please tick if you agree	\checkmark
•	I have seen the information book about this diabetes research (version 4)	
•	The information in this book has been explained to me (version 4)	
•	I have been able to ask any questions I want to about the research	
•	I know I don't have to answer all the questions the researcher asks if I don't want to	
•	I know that even if I say 'yes' to taking part in this research now, I can change my mind at any time. If I change my mind I know that I will still get the same care I usually do	
•	I am happy to speak with the researcher about my life and how I look after my diabetes	
•	I am happy that the researcher can contact my doctor and ask to see the information the doctor has about my diabetes	
•	I know that the research team will not tell anyone else my name	
•	The researcher has told me the times where the things I tell them would not be kept private. This might be because they are worried about me.	
•	I am happy to allow the researchers to write the things I have said in a report which other people will read. I know that the researchers will not use my name in a report so no one will know it is me who said it.	
	Sign or make your mark (your name)	

Today's date_

*Written consent MUST be obtained if possible



Researcher signs

Verbal Consent obtained*

_____ Today's date_____