

[Delete this line then print on Trust headed paper- given with study information]



PURPOSE

AGREEMENT TO RESEARCHER CONTACT- (16th July 2007, Version 1.0)

Name of researcher: Claudia Gorecki
Clinical Trials Research Unit
University of Leeds
Leeds
LS2 9NG
Ph: 0113 3437632

Name of consultant/nurse: _____

Contact number: _____

Development of a patient-reported outcome measure of HRQL for pressure ulcer patients (PU-QOL): Qualitative patient interviews

Please initial the boxes:

- I have read the information sheet and kept a copy.
- I am happy to discuss the study further in a visit from the above named researcher.

Please complete the following details in the space provided:

Name: _____

Date of visit: _____

Time of visit: _____

Location (e.g. patient's room number, clinic room number, instructions on finding location):

Thank you for completing this form.

Please telephone Claudia Gorecki on 0113 3437632 as soon as an interview is arranged.