INFORMED CONSENT FORM FOR PARTICIPANTS IN RESEARCH STUDIES

Please complete this form after you have received an explanation about the research.

If you have any questions arising from the explanation given to you, please ask the researcher before you decide to join in. You will be given a copy of this Consent Form to keep and refer to at any time.

Participant’s Statement:

I, the undersigned:

- Agree the research project has been explained to me to my satisfaction and sufficient time for reflection was granted.

- Declare I have read the Consent Form for participants and I have received a copy to keep.

- Certify that I have been informed of any potential benefits and/or possible risks that are associated with this study as well as the obligations involved in my participation.

- Have been told that I can withdraw my participation in this study at any moment without giving reasons and without any adverse consequences of any kind.

- Have been informed that all data will be collected and stored safely and reported in an anonymous form, in accordance with the CH Federal law on data protection (“Loi fédérale sur la protection des données” – RS 235.1).

- Agree that the principal investigator and/or the members of the Research Ethics Committee have access to the original data under strict confidentiality.

- It is my responsibility to have adequate health insurance and accident insurance coverage. In case of doubt, just like in case of discomfort or undesirable effects related to my participation in this study, I will contact the researchers directly.

- I agree to participate in this study.

Signature of participants: ___________________________ Date: ___________________________