



CONTENT Study

Consent for Medically Indicated Interventions in Childbirth.

INFORMED CONSENT FORM

<p>There are two sections in this form.</p> <p>Section 1: contains statements of understanding and asks you to tick each if you understand. Please ask any questions you may have when reading each of the statements.</p> <p>Section 2: asks for your informed consent. Please select either 'yes' or 'no' to indicate your choice.</p>	
Section 1 DECLARATION:	
I confirm that I have read and understood the Information Leaflet for the above study. The information has been fully explained to me and I have been able to ask questions, all of which have been answered to my satisfaction.	
I understand that taking part in this study is entirely voluntary. I understand that not taking part will have no negative impact on me.	
I fully understand that my participation is completely voluntary and that I am free to withdraw from the study <i>at any time</i> (prior to anonymisation) <i>without giving a reason</i> .	
I understand that I will not be paid for taking part in this study, I am aware of any potential risks and benefits of participating in the research study.	
I understand that information from this research will be published but that I will not be identified as a participant in this research in any publication.	
I know how to contact the research team if I need to (Contact details below)	
I understand that I will be given an opportunity to review the transcript (written copy of the interview) of the interview to confirm accuracy, if I wish. I understand I must make this request before the data is anonymised.	
I understand that confidentiality of records concerning my involvement in this project will be maintained in an appropriate manner. The original digital recording will be erased once the accuracy of the transcript has been confirmed the transcript will be identified by a unique code and not my name.	
I understand that the study has been approved by Trinity College Dublin's Research Ethics Committee. If I have further queries concerning my rights in connection with the research, I may contact the researchers or the data protection officer/s at Trinity College Dublin.	



Section 2: CONSENT

I agree to take part in this research study, having been fully informed of the risks and benefits in the participant information leaflet provided to me.	
I agree to the use of information about me (personal data – interview recording and transcript) being used by the research team for this research study as described in the participant information leaflet.	
By ticking each box above in section 1, and section 2 I agree to participate in this study as described in the Participant Information Leaflet.	

Participant Details:

Participant Name:	
E-mail address:	
Date:	

Chief Investigator and Post-doctoral Researcher Contact Details:

Principal Investigator/ Lead Researcher: Professor Andrea Mulligan
Email: andrea.mulligan@tcd.ie

Post-doctoral researcher: Dr Susan Hannon
Telephone: 01-8964766
Email: hannonse@tcd.ie

THE CONTENT STUDY



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