CONSENT DOCUMENT FOR PARTICIPATION IN A RESEARCH STUDY

TITLE: Comparative analysis of the effectiveness and safety of the Erectus Spinae Lumbar Plane block (ESP-L) versus no locoregional block in hip surgery

I, _____

- I read the above mentioned study participant information sheet that was given to me, I was able to chat with _____ and ask all necessary questions about the study.
- I understand that my participation is voluntary, and that I can withdraw from the study at any time, without having to give explanations and without this affecting my medical care.
- I consent to the use of my data under the conditions detailed in the participant information sheet.
- I freely give my consent to participate in this study.

Signed.: The participant,

First and last name: _____
Date:

Signed.: The researcher requesting consent

First and last name: _____
Date:

DOCUMENT OF CONSENT BEFORE WITNESSES FOR PARTICIPATION IN A RESEARCH STUDY (for cases where the participant cannot read/write)

The impartial witness will have to identify himself and be a person outside the investigative team

TITLE Comparative analysis of the effectiveness and safety of the Erectus Spinae Lumbar Plane block (ESP-L) versus no locoregional block in hip surgery

I _____, as an impartial witness, affirm that in my presence:

- _____ has read the Participant Information Sheet from the above-mentioned study given to you, and has been able to ask all questions about the study.
- You understand that your participation is voluntary, and that you can withdraw from the study at any time, without having to give explanations and without this affecting your medical care.
- You consent to the use of your data under the conditions detailed in the information sheet for the participant.
- You freely give your consent to participate in this study.

Signed.: The witness

Signed.: The researcher requesting consent

First and last name: _____
Date:

First and last name: _____
Date: