An Investigation of the Effect of 5 Consecutive Days of Bihemispheric tDCS on Speech Fluency in Individuals With Stuttering

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Date: 03/01/2024

INFORMED CONSENT FORM

Dear participant,

First of all, thank you for participating in our research. The name of this research is "An Investigation of the Effect of 5 Consecutive Days of Bihemispheric tDCS on Speech Fluency in Individuals With Stuttering" and it is a scientific research.
In this study, the effect of Transcranial Direct Current Stimulation (tDCS) applications and the accompanying metronome reading activity on speech fluency in individuals with stuttering will be investigated. tDCS application will be performed by applying weak electrical current to areas of the brain that have been previously identified as speech-related through electrodes placed on the skull. During the application, saline fluid will be applied to certain points on the head and electrodes will be placed and fixed on it. The tDCS device will then be switched on and a current of 1 mA will be applied for 20 minutes. There are no serious side effects reported in tDCS applications with an application dosage of 1-2 mA. However, mild temporary side effects such as headache, skin sensitivity at the application sites, moderate fatigue, reddening of the skin under the electrode, difficulty concentrating, momentary mood changes and nausea may occur. Volunteers are expected to be present at the requested location for 1 week, 5 days a week for a maximum of 2 hours in total to participate in the study. For this study, a total of 18 volunteer individuals with stuttering are expected to complete this 1-week process and participate in the final evaluation session after 1 week.
The participation of the individuals participating in the study is completely voluntary and the volunteer can withdraw from the study at any time, without any penal sanction, without losing any rights. After this form is signed, the medical records of the individuals participating in the study can be accessed by the monitors, polling people, health authorities and the ethics committee. However, this information will be kept confidential and the identity of the individuals participating in the study will remain confidential even if the research results are published. *When new information about the research emerges that may affect the participant's willingness to participate in the research, this information will be shared with the participants. Contact information for further information about this research, the rights of the individual or any undesirable situations that may arise is provided below.*
"I have read all the explanations in the Informed Voluntary Consent Form. I have been given written and verbal explanations about the above-mentioned subject and purpose of the research by the researcher named below. I know that I am participating in the research voluntarily and that I can leave the research at any time with or without reason. I agree to participate in this research voluntarily without any pressure or coercion."

Volunteer	Researcher
Name:	Name: Feyzanur
Surname:	Surname: January
Signature:	Signature:
Date:	Date:
	Contact Information: 05313606661