

Informed consent for participation in a medical research project

Titel of the research project: A new intelligent stocking for quantification of edema in the lower limbs

Declaration from the participant:

I have received both written and oral information and I know enough about the purpose, methods and pros and cons to accept participation.

I know participation is volunteer and I am always able to withdraw my consent without losing current or future rights for receiving treatment.

I hereby gives my consent to participate in the research project, and I confirm, that I received a copy of this document as well as copies of the written information of the project.

Name of study participant: _____

Date: _____ Signature: _____

If new information regarding your health is discovered, you will be informed. If you **do not** want to receive information about your health discovered during this study, please mark it here:
_____ (write x)

Do you want to receive results of the research project and possible consequences for you?:

Yes _____ (write x) No _____ (write x)

Declaration from the informant:

I declare, that the participant has received both oral and written information about the project.

From my perspective, I have been given enough information about the project, and you are able to judge whether you want to participate or not.

Name of the informant: _____

Date: _____ Signature: _____

Project identification: Version 1, marts 14, 2018.