

PARTICIPANT CONSENT FORM

NAME OF PARTICIPANT:

Title of the project: A cross-sectional study and a novel screening survey for radial artery assessment in surgical coronary revascularisation.

Main investigator and contact details: Vincenzo De Franco vincenzo.de-franco@pgr.aru.ac.uk

- | | Please initial |
|---|-----------------------|
| 1. I agree to take part in the above research. I have read the Participant Information Sheet (Date 23 May 2024 V 5.0) for the study. I understand what my role will be in this research, and all my questions have been answered to my satisfaction. | <input type="text"/> |
| 2. I understand that I am free to withdraw from the research at any time, without giving a reason, by speaking with the researcher or emailing them at vincenzo.de-franco@pgr.aru.ac.uk stating the title of the research. Data collected up until the point of withdrawal may still be used in analysis. | <input type="text"/> |
| 3. I am free to ask any questions at any time before and during the study. | <input type="text"/> |
| 4. I understand what information will be collected from me for the study. | <input type="text"/> |
| 5. For the purposes of the Data Protection Act (2018), if this project requires me to produce personal data, I have read and understood how Anglia Ruskin University and _____ will process it. | <input type="text"/> |
| 6. I understand that some information will be collected from existing records held about me. | <input type="text"/> |
| 7. I understand what will happen to the data collected from me for the research. | <input type="text"/> |
| 8. I have been informed how my data will be processed, how long it will be kept and when it will be destroyed. | <input type="text"/> |
| 9. I understand that I will be provided with summary of the findings. | <input type="text"/> |
| 10. I have been provided with a copy of this form and the Participant Information Sheet (Date 23 May 2024 V 5.0). | <input type="text"/> |

Name of participant	Date	Signature
Name of researcher	Date	Signature

PARTICIPANTS MUST BE GIVEN A COPY OF THIS FORM TO KEEP