



UNIVERSITY OF  
BIRMINGHAM

**Title:** A Placebo-controlled, Randomized, Double-masked, Cross-over Acute Intervention Study Investigating the Effects of Cocoa Flavanols on Peripheral Endothelial Function in the Context of Prolonged Sitting in Healthy Older Adults

Protocol ID/ Ethics ID: ERN\_19-0851B

Date of Approval: 14<sup>th</sup> September 2021



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**School of Sport, Exercise and Rehabilitation Sciences**

## ***Participant Consent Form***

**Study Title:** The impact of cocoa flavanols on blood vessel function during uninterrupted sitting in older adults

**Investigators:** Dr Catarina Rendeiro, Dr Sam Lucas, Mr Alessio Daniele, and Prof Carolyn Greig

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Please read the statements carefully and initial the boxes if you agree.**

I have read the study information sheet and have discussed the experiment with one of the above-named investigators, who have explained the procedures to my satisfaction.	<input type="checkbox"/>
I understand that I am volunteering to participate in the experiment by my choice and that I may stop and withdraw from the experiment at any time.	<input type="checkbox"/>
I confirm that I have not been treated for any cardiovascular, metabolic, neurological, or respiratory conditions in the past.	<input type="checkbox"/>
I confirm that I do not have any food allergies to the best of my knowledge	<input type="checkbox"/>
I understand that the data collected during the study may be looked at by responsible individuals from the University of Birmingham where it is relevant to my taking part in this research. I give permission for these individuals to have access to my data and understand that any information will be kept strictly confidential.	<input type="checkbox"/>
I understand that my digital data will be stored for a minimum of 10 years in accordance with University of Birmingham policies on password protected systems accessible only to research personnel associated with this study. I agree to this.	<input type="checkbox"/>
I understand that my questionnaire data will be stored for a minimum of 10 years in accordance with University of Birmingham policies in a locked cabinet only accessible to the research personnel associated with this study. I agree to this.	<input type="checkbox"/>
I would like to receive a summary of the study findings (tick ✓ your response) YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/>
I agree to the arrangements described in the Information Sheet as they relate to my participation. Then, I agree to participate in this study.	<input type="checkbox"/>

Name of the Participant (PRINT)

Date

Signature

\_\_\_\_\_  
Name of the Researcher (PRINT)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature