



CONSENT FORM

Title of Project: Snapshot Obstetric National Anaesthetic Research project SONAR 1

Centre Number:

Study Number:

Participant Identification Number for this study:

Name of Researcher:

Please
INITIAL
boxes

- I confirm that I have read the information sheet dated.....[TBC]..... (version.....[TBC].....) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.
- I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my medical care or legal rights being affected.
- I understand that the relevant sections of my medical notes, and data collected during the study may be looked at by individuals from regulatory authorities or from the NHS Trust. This will occur only where it is relevant to my taking part in this research. I give permission for these individuals to have access to my records.
- I understand that the anonymised information collected about me may be used to support other research in the future by this research group. It is possible that the data may be shared with other researchers, but this would be in its anonymised form only.

5. I agree to take part in the above study.

Name of Participant Date Signature

Name of Person taking consent Date Signature

When completed: 1 for participant; 1 for researcher site file; 1 to be kept in medical notes.

12/12/24 Version 1.3

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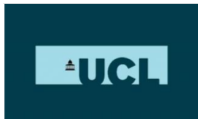
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Optional requests for future contact:

1. Request to provide contact details to keep in touch with the study

When the study is complete, a summary of the results will be written. The summary will be published as a press release to the funder and the sponsor for their websites, which are available for you. Also, if you would like, we can send you (by email) this summary of the results. If you are interested in receiving this summary of results, you can put your email address below. This is entirely optional and your contact details will not leave the hospital.

Email address for contact about the SONAR-1 study results:

2. Request to be contacted about future research on this topic

The study team would like to better understand women's experience of childbirth, particularly those who required surgery, so that we can develop ways to improve care for women and families in the future. We plan to do this by talking with patients either by phone, on a video-call or in person in a neutral location. If you are happy to consider contributing to this additional research project, we will contact you by email between 3 and 6 months from now. Your contact details will not leave the hospital, giving this information is entirely optional, and giving us permission to contact you does not commit you to taking part in any future research. If you would be happy for us to contact you for this, please put your email address below (or write 'as above' if you have provided it above).

Email address for contact about future research

When completed: 1 for participant; 1 for researcher site file; 1 to be kept in medical notes.

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