



ADDITION Study: Screening and treatment of diabetes

ISRCTN 86769081

		PROTECT-PRIVA	TE		
	Ethics reference number: H/0304/67			ID Barcode to be attached here	
	Participation identification number				
	CONSENT FORM Version num	mber 3			
	Name of Researcher (Chief Investigator	r): Dr Simon Griffi r	1		
				Please initial each box	X
1.	I confirm that I have read and understood the information sheet dated 26/08/2008 version 1.5 for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.				
2.	I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason and without my medical care or legal rights being affected.				
3.	. I agree that the information gathered about me can be looked after and stored by the MRC Epidemiology Unit and the University of Cambridge indefinitely for use in future projects aimed at identifying the causes of diabetes and its complications.				
4.	. I understand that research studies are occasionally monitored and that information gathered from me may be looked at by someone outside the study team, but this information will remain confidential at all times.				
5.	I agree to participate in this study				
Name of patient (BLOCK CAPITALS)		 Date	Si _i	gnature	
 Re	esearcher	 Date	Si	 gnature	