



CONSENT FORM

The RATPAC trial of rapid blood testing for acute chest pain

Patient Study Number: _____

Name of Researcher: _____

Please initial each box

I confirm that I have read and understand the information sheet, version 002 dated 15 August 2007, for the above study and have had the opportunity to ask questions.

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 agree that my General Practitioner will be informed of my participation in this research.

I understand that sections of any of my medical notes may be looked at by responsible individuals from the Research Team or from regulatory authorities where it is relevant to my taking part in the research, and will be treated confidentially. I give permission for these individuals to have access to my records.

I understand that if I provide a blood sample it may be stored and used to evaluate new blood tests for heart disease.

I agree to take part in the above study.

Name of patient (PLEASE PRINT)

Signature

Date

Name of person taking consent (PLEASE PRINT)

Signature

Date

For further information, please contact:
Liz Cross, RATPAC Trial Manager, Medical Care Research Unit, SchARR, University of Sheffield
Telephone: 0114 222 0762 or email: e.a.cross@sheffield.ac.uk
Study website: www.shef.ac.uk/chestpain