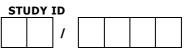
The AHEAD Study: monitoring anticoagulated patients who suffer head injury



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CONSENT FORM

Thank you for reading the information about the AHEAD Study. If you would like to take part, please read and complete this form.

I confirm that I have read and understand the information sheet dated 29th November 2011 (Version 5) for the AHEAD study. I have had the opportunity to consider the information, ask questions and have them 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 responsible individuals from the AHEAD Study Team, from regulatory authorities or from the NHS Trust, where it is relevant to my taking part in this research. I give permission for these individuals to have access to my records.

I agree that information I provide may be used by the Emergency and Immediate Care Group at the University of Sheffield in the future provided that the proposed research is in the public interest, that it has received approval from a suitable ethics committee and that the research is of the highest standard.

I agree to take part in the AHEAD Study.

Signature

Date

Print name

<u>Please return</u> this form to the Study Team along with the completed questionnaire in the **freepost self-addressed envelope provided.**

Please initial each box to confirm





