

Sample Informed Consent

I certify that I have read the preceding or it has been read to me and that I understand its contents. Any questions that I have pertaining to the research have been and will be answered by _____ . A copy of this consent form will be given to me. My signature below means that I have freely agreed to participate in this experimental study.

Date

Patient/Subject Signature

Date

Witness

I certify that I have explained to the above individual the nature and purpose, the potential benefits, and possible risks associated with participating in this research study; I have answered any questions that have been raised and have witnessed the above signature.

Date

Investigator's Signature