### CONSENT DOCUMENT FOR CLINIC PERSONNEL

DISCIPLINE OF AUDIOLOGY SCHOOL OF HEALTH SCIENCES Tel: 031 260 7438/8986 Fax: 031 260 7622 E-mail: sitholep2@ukzn.ac.za E-mail: naidoor1@ukzn.ac.za



## **CONSENT DOCUMENT**

## Cisplatin-induced ototoxicity amongst patients with ovarian cancer and the feasibility of an

### audiological monitoring program at the Inkosi Albert Luthuli Central Hospital

You have been invited to participate in this research study.

You have been informed about the study by the researcher.

You may contact Ms Jessica Paken at the University of KwaZulu-Natal, Audiology Department, on 031-2607548 any time if you have any questions about the research.

You may contact the: BIOMEDICAL RESEARCH ETHICS ADMINISTRATION University of KwaZulu-Natal Research Office, Westville Campus Govan Mbeki Building Private Bag X 54001, Durban, 4000 KwaZulu-Natal, SOUTH AFRICA Tel: 27 31 2604769 - Fax: 27 31 2604609 Email: BREC@ukzn.ac.za, if you have any questions about your rights as a research participant.

Your participation in this research is voluntary, and you will not be penalized or lose benefits if you refuse to participate or decide to stop.

If you agree to participate, you will be given a signed copy of this document and the participant information sheet which is a written summary of the research.

# The research study, including the above information, has been described to me. I understand what my involvement in the study means and I voluntarily agree to participate.

Signature of Participant

Date

Signature of Witness (Where applicable)

Date