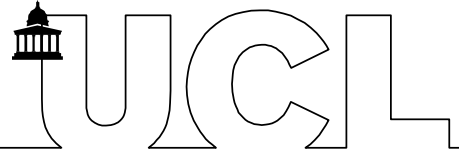


Appendix C: Study Consent Form

**CENTRE FOR OUTCOMES RESEARCH AND
EFFECTIVENESS
UCL**



EVIDENCE INTO RECOMMENDATIONS

Name of Researcher: Prof Susan Michie

Please read each statement and tick the box if you agree

- 1. I confirm that I have read and understand the information sheet dated 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 any reason, without my legal rights being affected.
- 3. I understand that the meetings I attend will be recorded and transcribed and excerpts may be looked at by responsible individuals from the research team. I give permission for the research team to have access to the data.
- 4. I understand that I may be interviewed about the guideline group process and the transcript of this interview may be looked at by responsible individuals from the research team. I give permission for the research team to have access to the data.
- 5. I understand that email correspondence relating to the guideline group I am part of may be collected during the study and may be looked at by responsible individuals from the research team. I give permission for the research team to have access to the data.
- 6. I agree to take part in the above study.

_____	_____	_____
Name of Participant	Date	Signature
_____	_____	_____
Researcher	Date	Signature

When completed, 1 for participant; 1 for researcher site file; 1 for National Collaborating Centre files