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**CONSENT FORM – SLT/SLTA Observation**

 **Final Version 1.1 – 2 March 2023**

### Title of Study: Swallow Strength and Skill Training with Biofeedback in Acute Post Stroke Dysphagia

**IRAS Project ID:** 319969

**Name of Researcher**: Dr Jacqui Benfield

**Name of Participant:**

**Please initial box**

1. I confirm that I have read and understand the information sheet Version 1.1 dated 2 March 2023 for the above study and have had the opportunity to ask questions had them answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, and without my legal rights being affected. I understand that should I withdraw then the information collected so far cannot be erased and that this information may still be used in the project analysis.

3. I understand that data collected in the study may be looked at by authorised individuals from the University of Nottingham, the research group and regulatory authorities where it is relevant to my taking part in this study. I give permission for these individuals to have access to these records and to collect, store, analyse and publish information obtained from my participation in this study. I understand that my personal details will be kept confidential.

4. I understand that notes will be taken during the observations and that anonymous direct quotes from the observation may be used in the study reports.

5. I understand that the information collected about me will be used to support
other research in the future, and may be shared anonymously with other researchers.

6. I agree to take part in the above study.

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# Name of Participant Date Signature

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Name of Person taking consent Date Signature