

**ONLINE Anesthesia Awareness Registry Survey 2
INFORMATION STATEMENT:**

Researchers

Karen B. Domino, MD, MPH	Professor, Anesthesiology	206-616-2669
Christopher D. Kent, MD	Assistant Professor, Anesthesiology	206-616-2669
Karen L. Posner, PhD	Research Professor, Anesthesiology	206-616-2669
Nora Metzger, MSW	Research Coordinator, Anesthesiology	206-616-2669

Researcher's Statement

You are enrolled in the Anesthesia Awareness study. We are asking you to complete a second survey as part of this research study. We want to learn about the emotional impact of awareness during general anesthesia. The second survey will ask about the emotional impact of awareness under anesthesia. It includes questions about past traumatic events, such as whether you have experienced sexual assault, physical assault, or other very stressful events. Survey 2 will ask about how you are currently feeling, and includes questions about, for example, feeling as if your future will somehow be cut short. You are free to not answer any question. You are free to not answer any question and to stop taking the survey at any time. We hope that the results of this study will help anesthesiologists care for patients better in the future.

-Survey 2 can take from 30-45 minutes to complete and will need to be completed in one session. You will have the opportunity to go back and review all your responses before you complete the survey.

-Although we will make every effort to keep your information confidential, no system for protecting your confidentiality can be completely secure. It is still possible that someone could find out you were in this study and could find out information about you. Information about you is confidential. We will code your survey responses and medical information. The link between your name and the code will be kept in a secured location, separate from the study information. We will keep the link between your name and the code until January 1, 2022, and then we will destroy the link. If you are eligible to participate in other studies before that time, we will contact you about these studies. We will not pay you for being in this study. The survey may also bring up unpleasant memories.

-We have obtained a Certificate of Confidentiality from the Federal Government. This Certificate is not an endorsement from the Federal Government for our research. Rather, it protects your privacy by allowing us to refuse to release your name or other identifying information to anyone outside of the research project and institution, even by a court subpoena, except as described below. In the unlikely event of a federal audit, we may have to reveal your name but only to those authorized representatives. The Certificate of Confidentiality does **not** prevent you or a member of your family from voluntarily releasing information about yourself or your involvement in this research. If an insurer, employer, or other person obtains your written consent to receive research information, then the researchers may not use the Certificate to withhold that information. We will release your name and other identifying information to the appropriate officials, if we find or suspect intent to harm yourself or others.

-If you have questions later about the research, you can ask one of the researchers listed above. If you have questions about your rights as a research subject, you can call the Human Subjects Division at (206) 543-0098. Please print a copy of this information statement for your records.

-This study has been explained to me, and I voluntarily consent to participate

BEGIN SURVEY

NO, THANKS