**Text that could be used in a UW consent form – replace the XX with the appropriate name**

Name of participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_

*We are asking you to be in a research study. This form gives you information to help you decide whether or not to be in the study. Being in the study is voluntary. Please read this carefully. You may ask any questions about the study. Then you can decide whether or not you want to be in the study.*

**What is the purpose of this study?**

The purpose of this study is to learn why …. To do this study, we will be enrolling both persons with XXX and control subjects (persons without XXX).  We will take pictures of your brain using a large machine called a MRI scanner.  We hope that the information we get from this study will help us better understand how to help people with XXX.

**What will happen and how long will you be in the study?**

**Study specific details XXX**

During the scan, you will have to lie still. An MRI scan is taken in a large machine that is shaped like a tunnel. This scan does not use x-rays. Instead, it uses a strong magnet and radio waves, like those used in an AM/FM radio to make pictures of your body. Metal can sometimes cause poor pictures if it is close to the part of the body being scanned. For these reasons, you will be asked to remove these objects before going into the room for the scan. You will complete a survey to make sure it is safe for you to enter the MRI scanner. You will hear “hammering”, clicking, or squealing noises during the scan. You will be given earplugs and/or headphones to reduce the noise. You will also be told how to alert the staff if you need them.

During the scan, the MRI staff is able to hear and talk to you. You will also be able to hear the staff. You will be asked to lie very still throughout the scan. In this study, the MRI scan will be used for research purposes only and is not diagnostic.

**Risks that you can expect if you take part in this study:**

There are no known major risks with an MRI scan. However, even though the tunnel is open, it may bother you to be placed in a tight space (claustrophobia), and to hear the noise made by the magnet during the scan. You will be given earplugs and/or headphones to reduce the noise. You may also feel the table vibrate and/or move slightly during the scan. It may be hard to lie on the table during the scan. If there are any metal pieces in the body, they could move during the scan and damage nearby tissues or organs (this may exclude the patient from scanning). Transdermal patches slowly deliver medicines through the skin.  Some patches have metal in the layer of the patch that is not in contact with the skin (the backing).  You may not be able to see the metal in the backing of these patches.  Patches that contain metal can overheat during an MRI scan and cause skin burns in the immediate area of the patch. If you use a transdermal patch (medicated patches applied to the skin), it may have to be taken off during the MRI scan.

Incidental findings: XXX

**Benefits of this study:**

You will not directly benefit from being in this study, but the information learned from this study is intended help XXX

**Payments for your time spent taking part in this study or expenses:**

**Research-related injury:**

If you think you have a medical problem or illness related to this research, contact Cole Anderson (206 685 1604) right away. He will refer you for treatment.

The costs of the treatment may be billed to you or your health insurance just like other medical costs, or it may be covered by the UW’s discretionary Human Subjects Assistance Program (HSAP), depending on a number of factors. The researcher may request HSAP coverage by following established procedures. If you wish to request HSAP coverage yourself, contact the researcher or the UW Human Subjects Division at [hsdinfo@uw.edu](mailto:hsdinfo@uw.edu) or 206-543-0098. You may also call collect to the UW Human Subjects Division at 206-221-5940 if you do not otherwise have access to a telephone. Ask the researcher if you would like information about the limits and conditions of the HSAP. The UW does not normally provide any other form of compensation for injury. However, the law may allow you to seek payment for injury-related expenses if they are caused by malpractice or the fault of the researchers. You do not waive any right to seek payment by signing this consent form.

**Who to call for any questions?**

# STATEMENT BY PERSON AGREEING TO BE IN THIS STUDY. This study has been explained to me. I volunteer to take part in this research. I have had a chance to ask questions. If I have questions later about the research, or if I have been harmed by participating in this study, I can contact one of the researchers listed on the first page of this consent form. If I have questions about my rights as a research subject, I can call the Human Subjects Division at (206) 543-0098 or call collect at (206) 221-5940.

Date Signature of subject

Printed Name and Title

Consent obtained by:

Date Signature