INSTRUCTIONS: **PARTICIPATION IN CLINICAL TRIALS AND RESEARCH WORKSHEET**

Many people appreciate the benefits of medical research and wish to contribute but do not know how to find opportunities. Others do not think about research until they become sick but then want to participate in any way they can. Still others have family members or friends with serious illnesses and wish to contribute to research that may one day help their loved ones.

Opportunities to participate in medical research require informed consent or deferred authority to give informed consent. If you are able to provide ethically valid consent you may enroll yourself in medical research as you choose. If you do not have the capacity to decide whether to enroll in research you can give that authority to your surrogate (sometimes called a proxy) to use on your behalf.

This means that if you wish to participate in research for the benefit of the public welfare, and potentially but not necessarily also yourself, you can indicate your consent by signing this page of the document. By signing this document you agree to allow your surrogate to decide on your behalf whether to consent or to decline your participation in different types of medical research.

I authorize my patient advocate:

_____

(patient advocate name)

to consent to enroll me or withdraw me from an IRB (Institutional Review Board) approved research study under the following conditions.

SELECT ONE:

☐ **The study poses to subjects no greater than minimal risk.**

☐ **The study poses to subjects a slight increase over minimal risk.**

☐ **The study poses to subjects more than a slight increase over minimal risk.**

My comments:

PATIENT NAME *(please print):*_____

PATIENT SIGNATURE:_____ **Date:**_____

- An Institutional Review Board protects the rights and welfare of human subjects involved in research activities being conducted under its authority.