

**The Institute for Ageing and Health
Newcastle University**

The Newcastle



Study

Stage

Form for 'Personal/Nominated Consultee' Opinion

We are asking
to take part in stage three of the Newcastle 85+ study.

We understand that they may find it difficult to make decisions about participation because of memory problems. However we believe they can make a valuable contribution. We would be grateful for your opinion as to whether you think they would wish to continue to take part in this research.

Please ensure that you have read the accompanying information booklet which explains why we are doing this research and what we are asking them (and you) to do during stage three. If you find reading or understanding the information difficult, please ask a family member or someone close to you to help you.

Please ask the research team any questions.

Remember:

- That participation in this study is entirely voluntary and they or you may withdraw from the whole or any part of the study at any time without affecting their usual medical care.
- It is unlikely that taking part will have any direct benefit for participants.

I(name of person giving
 ‘personal/nominated consultee’ opinion)
 of
(address of person giving
 ‘personal/nominated consultee’ opinion)
 agree to (name of participant)
 taking part in stage three of The Newcastle 85+ Study.

I understand the information that has been given to me about the study and this particular stage. I have been given time to think about the information and the opportunity to ask questions. I know that consent is voluntary and they or I can withdraw from the whole or any part of the study at any time. I understand that declining to participate will not affect their usual medical care. I agree to help provide information for the questionnaire if necessary and appropriate.

To the best of my knowledge
 would not object to taking part in this study and would not be caused any undue distress by participation.

Please initial box	Consent	Decline
I agree to their participation in stage three of the Newcastle 85+ study		
I agree that blood samples can be taken from them.		
I agree that samples of their blood can be stored for future analysis of genetic and other factors involved in health in old age, ageing and life-span.		
I agree to allow a member of the study team to review their medical records (primary care, dental and hospital records).		
I agree to allow a member of the study team to review their medical records (primary care, dental and hospital records) in the event of their death.		
I agree to allow a member of the study team to review records that may be held by social services about use of their services		
I agree to allow a member of the study team to review records that may be held by social services about use of their services in the event of their death		

I agree to allow their doctor to be contacted with the results of medical tests that are important for their health		
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I understand that, in the event that something goes wrong and they are harmed during the research study, there are no special compensation arrangements. If they are harmed and this is due to someone's negligence then they may have grounds for a legal action for compensation against Newcastle University.

The nature and demands of the study and this particular stage have been explained to me. I fully understand and accept them.

On behalf of..... (Name of participant)

Signed..... Print Name.....

Relationship to participant.....Date.....

Investigator Statement:

I confirm that I have explained the study and given every opportunity for;(participant) and.....(Personal/nominated Consultee) to receive and consider the information about the study and stage three .

Name.....Signed.....

Designation.....Date.....

This individual providing approval is a: *(tick one box)*

personal consultee

nominated consultee

The Personal/nominated Consultee was identified by: *(tick one box)*

the participant at informed consent

the researcher (provide reasoning)

.....
.....

appropriate other source (identify who and provide reasoning)

.....
.....

Copied for participant *(Tick when completed)*

Copied for personal/nominated consultee *(Tick when completed).*

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