

Study Title:

Principal Investigator:

**EXPERIMENTAL SUBJECT'S BILL OF RIGHTS**

You have been asked to participate as a subject in a medical experiment. Before you decide whether you want to participate in the experimental procedure, you have a right to the following information:

***CALIFORNIA LAW REQUIRES THAT YOU MUST BE INFORMED ABOUT:***

1. The nature and purpose of the study.
2. The procedures in the study and any drug or device to be used.
3. Discomforts and risks reasonably to be expected from the study.
4. Benefits reasonably to be expected from the study.
5. Alternative procedures, drugs or devices that might be helpful and their risks and benefits.
6. Availability of medical treatment should complications occur.
7. The opportunity to ask questions about the study or the procedure.
8. The ability to withdraw from the study at any time and discontinue participation without affecting your future care at this institution.
9. Be given a copy of the signed and dated written consent form for the study.
10. The opportunity to consent freely to the study without the use of coercion.

I have carefully read the information contained above and I understand fully my rights as a potential subject in this study.

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Signature: \_\_\_\_\_

(subject)

Signature: \_\_\_\_\_

(parent or legally authorized representative, if applicable)

If signed by other than the subject, indicate relationship: \_\_\_\_\_