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UCLH Project ID number: 07/Q0502/15
Form version 5, 7th February 2023

CONSENT FORM

Title of project: Development of novel magnetic resonance techniques using volunteer participants.

Name of Principal Investigator: Professor Shonit Punwani

- Please initial each box
1. I confirm that I have read and understood the patient information sheet dated 7th February 2023 (version 7) for the above study and have had the opportunity to ask questions.
 2. I confirm that I have had sufficient time to consider whether or not want to be included in the study.
 3. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, without my medical care or legal rights being affected.
 4. I agree to the administration of a contrast agent for this research.
 5. I understand that this research scan is not intended for diagnostic purposes. In the unlikely event that something on the scan suggests a need for medical follow-up, I understand that a radiologist will inform me, and may contact my GP if appropriate.
 6. I agree to allow any MRI data acquired during my scan to be used, anonymised so that I cannot be identified, for research or teaching.
 7. I agree to take part in the above study.

(continued overleaf)



CONSENT FORM

Title of project: Development of novel magnetic resonance techniques using volunteer participants.

Name of Principal Investigator: Professor Shonit Punwani

This study has no diagnostic purpose and is not intended for screening or diagnostic purposes. However, in the unlikely event that something on the scans suggests a need for medical follow-up, a radiologist will review the images and inform you. They may also contact your GP.

Name of volunteer

Date

Signature

Name of person taking consent

Date

Signature

Researcher to contact if there are any problems (name, organisation and telephone number):

Comments or concerns during the study

If you have any comments or concerns you may discuss these with the investigator. If you wish to go further and complain about any aspect of the way you have been approached or treated during the course of the study, you should contact the UCLH Patient Advice and Liaison Service (PALS) the details of whom are on the patient information sheet. Please quote the UCLH project number at the top this consent form.