CAROPROT – Influence of proteins on carotenoid digestion and aspects of bioavailability

Written Informed Consent

Version date: 07.08.2019
INFORMED CONSENT FORM

CAROPROT – INFLUENCE OF PROTEINS ON CAROTENOID BIOAVAILABILITY

I ____________________________________, hereby acknowledge that I was informed in detail about the present study. I was given enough information about its contents, objectives and about my rights as a participant.

I understood the information that was given to me; I had the opportunity to pose questions, which were answered to my satisfaction.

I have been informed about the collection of samples in the study and I agree with the collection:

☐ of blood and urine samples,
☐ of stool samples,

I am aware that in the study the collection and analysis of samples is foreseen, as well as the intake of additional proteins. The purpose and possible risks of the study were explained to me.

I am aware that some blood analyses will have to be carried out in other institutions outside of the Clinical and Epidemiological Investigation Centre (CIEC-LIH).

I was guaranteed that all my personal data will be treated in a strictly confidential way and it will be preserved in complete anonymity for five years, as written in the amended law of 2\textsuperscript{nd} August 2002 on personal data protection.

I also consent to the possible publication of the results, in scientific journals, in complete anonymity.

I am free to withdraw my consent and participation from this study at any time after notifying the project director, without compromising any future care.

I declare that I have fully read the Informed Consent Form. I sign it freely and voluntarily, and I was given a signed copy of this document.

Signature of Participant: ___________________________________________ Date:

Part for the researcher:

I hereby certify, ___________________________________________, having informed the above participant about the objectives, the nature, the duration and the risks of this study and certify that he / she agreed to take part in this study.

Date: ___________________ Signature: ___________________

CONTACTS FOR FURTHER INFORMATION

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