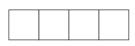


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MifeMiso: A randomised placebo-controlled trial of mifepristone and misoprostol versus misoprostol alone in the medical management of missed miscarriage

Patient Satisfaction Interview Study

PARTICIPANT INTERVIEW CONSENT FORM

	_						
Chief Investigator: Professor Arri Coomarasamy			Initial each box to				
emer investigator. Professor Arri coomarasamy			confirm consent				
	_		Committe Consent				
I confirm that I have read and understand the patie	nt information leafle	et (version dated / /) for t	ie –				
•							
MifeMiso Patient Satisfaction Interview Study. I have had the opportunity to ask questions and these have been							
answered satisfactorily.							
I understand that my participation in an interview is voluntary and I am free to withdraw at any time, without giving a							
reason and without my treatment or legal rights being affected.							
reason and without my treatment of legal rights bei	ing uncered.						
I understand that the information collected will be used for medical research only and that I will not be identified in any							
way in the analysis and reporting of the results. I understand that even if I withdraw from the study, information already							
collected about me may be included in the final stud	dy analysis after bein	g anonymised.					
•	ar stady arranges arter being arronymised.						
I agree to the interview being audio-recorded and	understand that the	recordings will be kent safe at the University	of				
			"				
Birmingham and that everything I say will be kept co	onfidential in accorda	ance with the Data Protection Act 1998.					
I understand that the transcription of the audio-rec	ording will be done b	by a specialist transcription company, and will l	ie				
handled in accordance with the Data Protection Act 1998.							
I agree that quotes from the interview can be used anonymously in any publication of the research findings.							
I understand that researchers for the MifeMiso P	'atient Satisfaction Ir	nterview Study based at my hospital or at ti	ıe				
University of Birmingham may contact me by telephone, mobile telephone, post or e-mail to request information.							
I understand the information that I have been given	about the MifeMisc	Patient Satisfaction Interview Study and Lagro	ee Ee				
to take part.							
Name of Participant:	Date:	Signature:					
Name of Researcher:	Date:	Signature:					
Nume of Researcher.	_ Date.	Jigiiatui c					

Master copy for MifeMiso Trial Office, 1 copy for Participant, 1 copy for qualitative researcher

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