

# Febrile Illness Etiology in a Broad Range of Epidemiology (FIEBRE)

*Consent Form [English version]*

*V.0.1.00*

Before you decide whether to take part it is important for you to understand why the research is being done and what the study involves. If something is not clear or you would like more information, please ask

## **What is fever?**

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## **What is the study about?**

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## **Whose help do we need?**

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## **What does the study involve?**

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## **Who is doing this research?**

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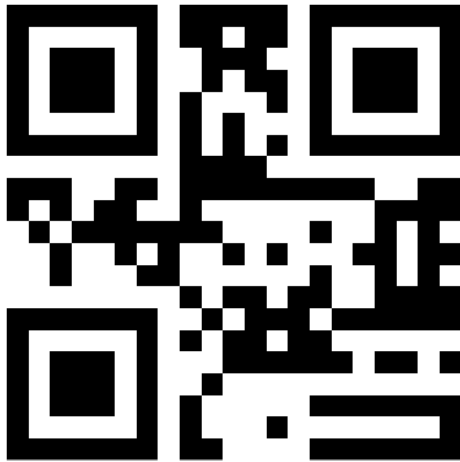
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**THIS STUDY IS COMPLETELY CONFIDENTIAL: WE WILL NOT GIVE ANYONE ELSE ACCESS TO YOUR INFORMATION.**

## Subject

1. I confirm that I have read, or had the information sheet for the FIEBRE study read to me and I fully understand it. I have had the chance to ask questions and they have been answered fully. ☐
2. I understand that participation is voluntary and I am free to withdraw at any time without giving reason without my medical care being affected. ☐
3. I agree to take part in the FIEBRE study. ☐

This is the ID : LA-10001



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

Name : \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
yyyy-mm-dd