



Figure 1 University of Kentucky logo

# Consent to Participate in a Research Study

## KEY INFORMATION For User Study of PNWX site:

We are asking you to choose whether or not to volunteer for a research study about [testing the Pacific Northwest X-Ray Inc. website to gain information on how to improve it](#). We are asking you because you are an [adult that can easily navigate on a computer and communicate any obstacles when completing tasks and searches on the site](#). This page is to give you key information to help you decide whether to participate. We have included detailed information after this page. Ask the research team questions. If you have questions later, the contact information for the research investigator in charge of the study is below.

### What is the study about and how long will it last?

By doing this study, we hope to learn [what the biggest issues are on the PNWX site and how users would attempt to navigate it so that we can determine ways to improve the site's information architecture](#). Your participation in this research will last [less than an hour](#).

### What are KEY reasons you might choose to volunteer for this study?

The benefit of volunteering for this study is the knowledge that you will be helping create a successful project and [provide feedback that will potentially improve a site needed by professionals to obtain vital equipment](#). For a complete description of benefits and/or rewards, refer to the Detailed Consent.

### What are Key reasons you might choose NOT to volunteer for this study?

If you are under the age of 18, are not able to read or use a computer, then you would not be a good fit for this study. For a complete description of risks, refer to the Detailed Consent.

## DO YOU HAVE TO TAKE PART IN THE STUDY?

If you decide to take part in the study, it should be because you really want to volunteer. You will not lose any services, benefits, or rights you would normally have if you choose not to volunteer.

As a student, if you decide not to take part in this study, your choice will have no effect on your academic status or class grade(s).

## WHAT IF YOU HAVE QUESTIONS, SUGGESTIONS OR CONCERNS?

If you have questions, suggestions, or concerns regarding this study or you want to withdraw from the study contact [Brandi Cheeks](#), [Hannah Dick](#), [Sarah Redmon](#), or [Jaclyn Tirabassi](#) of the University of Kentucky Information Architecture class, ICT 320, in the School of Information Science.

If you have any concerns or questions about your rights as a volunteer in this research, contact staff in the University of Kentucky (UK) Office of Research Integrity (ORI) between the business hours of 8am and 5pm EST, Monday-Friday at 859-257-9428 or toll free at 1-866-400-9428.

## Detailed Consent:

*The following detailed consent template includes sample language for many different types of research. REMOVE TEXT THAT DOES NOT APPLY TO YOUR RESEARCH.*

*Instructions are italicized in blue font. Remove the instructions, unwanted text, and underlines and reformat the final form to fit the protocol.*

*Use lay language and terminology throughout the document. Tools are available on the [ORI Informed Consent Webpage](#) including links to [simple words and phrases](#); [everyday words](#); and [lay term glossaries](#). Check readability scores and use these tools to develop clear language that is appropriate for your subject population.*

### **FUTURE USE:**

*If you plan to [STORE](#) or [SHARE](#) information from [this study](#) for future secondary use, refer to the [Medical Consent Template](#) for applicable sections to insert in the detailed consent.*

### **OPTIONAL APPENDIX:**

*Lengthy lists of examples, tables, decision tools, glossaries, reference lists, or graphics may be best presented in an Appendix instead of paragraph text. If using an appendix, state in the Detailed Consent when additional information can be found in the Appendix. Delete Appendix place holder if not used.*

## ARE THERE REASONS WHY YOU WOULD NOT QUALIFY FOR THIS STUDY?

If you are under the age of 18, are not able to read, do not have access to or the ability to use a computer, then you may not qualify for this study. Additionally, if you have any issues with viewing information about x-rays or other medical supplies, then you may not want to volunteer for this study.

## WHERE WILL THE STUDY TAKE PLACE, AND WHAT IS THE TOTAL AMOUNT OF TIME INVOLVED?

The research procedures will be conducted online or in-person at the discretion of the group member interviewing you. The in-person meeting location will be predetermined between interviewer and interviewee. You will need to come one time during the study. Each visit will take about 30 minutes. The total amount of time you will be asked to volunteer for this study is at most 1 hour.

## WHAT WILL YOU BE ASKED TO DO?

We will ask you some questions about yourself and your use of technology. Then, we will ask you questions about the PNWX website and its features and structure. Then, we will ask you to perform a few tasks on the site to see how easy it is for you to navigate and find information the site provides. During an in-person study, we will ask you to think aloud while performing these tasks and using the website so that we can understand your choices. Follow-up questions for each task may be asked. Then, you will sort cards labeled with different items into specified categories. Finally, we will ask open-ended questions about your overall experience using the website.

## WHAT ARE THE POSSIBLE RISKS AND DISCOMFORTS?

Participants may experience some frustration while navigating the site, otherwise your safety and comfort will not be at risk. In addition to risks described in this consent, you may experience a previously unknown risk or side effect.

Commented [DM1]: This is the procedure we need to add

Commented [CL2R1]: Added a few things here. Feel free to edit if needed.

## WILL YOU BENEFIT FROM TAKING PART IN THIS STUDY?

We do not know if you will get any benefit from taking part in this study. However, some people have experienced positive feelings from helping with this project by providing insight into the website from a user's perspective and, if you take part in this study, information learned may help others.

## IF YOU DON'T WANT TO TAKE PART IN THE STUDY, ARE THERE OTHER CHOICES?

If you do not want to be in the study, there are no other choices except not to take part in the study.

## WHAT WILL IT COST YOU TO PARTICIPATE?

There are no costs associated with taking part in this study, other than potentially the cost of transportation if you are traveling to meet for an in-person study.

## WHO WILL SEE THE INFORMATION THAT YOU GIVE?

When we write about or share the results from the study, we will write about the combined information. We will keep your name and other identifying information private.

We will make every effort to prevent anyone who is not on the research team from knowing that you gave us information, or what that information is. Participants will be referred to in our reports by numbers or pseudonyms to provide anonymity. All data will only be shared amongst our research team and supervising professor via secure online communications.

You should know that in some cases we may have to show your information to other people because this is an academic project for a class. If you have questions about what constitutes a reportable disease and/or condition in the state of Kentucky, see ORI's summary sheet: "[Reporting Requirements for Diseases and Conditions in Kentucky](#)".

For example, the law may require or permit us to share your information with:

- a court or agencies, if you have a reportable disease/condition;
- authorities, such as child or adult protective services, if you report information about a child or elder being abused;
- authorities or a mental health professional if you pose a danger to yourself or someone else (e.g. suicidal thoughts).

To ensure the study is conducted properly, the University of Kentucky, and officials from the School of Information Science may look at or copy pertinent portions of records that identify you.

For any surveys conducted online, we will make every effort to safeguard your data, but as with anything online, we cannot guarantee the security of data obtained via the Internet. Third-party applications used in this study may have Terms of Service and Privacy policies outside of the control of the University of Kentucky.

## CAN YOU CHOOSE TO WITHDRAW FROM THE STUDY EARLY?

You can choose to leave the study at any time. You will not be treated differently if you decide to stop taking part in the study.

If you choose to leave the study early, data collected until that point will remain in the study database and may not be removed.

The investigators conducting the study may need to remove you from the study for reasons such as difficulty following the procedure and instructions provided.

**ARE YOU PARTICIPATING, OR CAN YOU PARTICIPATE IN ANOTHER RESEARCH STUDY AT THE SAME TIME AS PARTICIPATING IN THIS ONE?**

You may take part in this study if you are currently involved in another research study.

**WILL YOU RECEIVE ANY REWARDS FOR TAKING PART IN THIS STUDY?**

You will not receive any tangible rewards or payment for taking part in the study.

**WHAT ELSE DO YOU NEED TO KNOW?**

If you volunteer to take part in this study, you will be one of about 4 people to do so.

The Primary Investigators are being partially guided in this research by Dr. Jackie Brodsky. There may be other people on the research team assisting at different times during the study.

## INFORMED CONSENT SIGNATURES

This consent includes the following:

- Key Information Page
- Detailed Consent

You are the subject or are authorized to act on behalf of the subject. You will receive a copy of this consent form after it has been signed.

_____ <b>Signature of research subject</b> <i>or, if applicable,</i> <i>*research subject's legal representative</i>	_____ <b>Date</b>
_____ <b>Printed name of research subject</b>	
_____ Printed name of [authorized] person obtaining informed consent	_____ Date