

vetPartners

Project DRAPES: Owner consent form

This consent form confirms that I give permission for my pet to be included in the above study as stated in the information sheet. I am aware and accepting of the procedures that will take place.

By signing this cons	sent form I am confirming that (please tick boxes to indicate agre	eement):	
	I am the owner/guardian of the animal that is to be included in this study and I have the necessary authority to make the decision to allow participation in this study.			
☐ I am over 1	8 years old.			
☐ I have read	I have read the study information and understand the details of the study and what it entails.			
☐ I have had t	the opportunity to ask questions	s and have had them answered.		
	·	will remain confidential and that (except as might be required by la		
_	data gathered in this study may and collated form.	y be stored anonymously and sec	urely and published in	
	d that my (and my pet's) partici	pation is voluntary and that I am d without giving a reason	free to withdraw at any	
Name				
Signed		Date		
Pet's name:		Patient ID number		
	Please place sticker from	m envelope in the box below:		
	For pra	For practice use only		

Please file this form in the DRAPES study folder once the animal is discharged.