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Name of Participant:

**CONSENT TO PARTICIPATE**

**IN MRI SCANNING SESSION**

**Study name**

**Investigator: PI name**

You are being invited to take part in a research study that involves magnetic resonance imaging (MRI). Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is unclear or if you would like more information.

Procedures

During the scanning session you will be asked to lie down on a table. Foam pads will be placed around your head to limit head movement during the study. The table will then be slid into the magnet.

While in the scanner, you will be asked to lie still for approximately X hours, during which time several scans will take place. For obtaining some of the images, you don’t have to do any specific task, other than relaxing while keeping your head and body still. During some of the scans you may be asked to:

Describe tasks. E.G.:

* Passive watching or listening to stimulus information (e.g., visually presented checkerboard patterns, visually or auditorally presented words
* Watching or listening to stimuli and making a response (e.g., button or verbal response) about the type of stimuli seen or heard
* Moving specific regions of his/her body (e.g., tapping his/her fingers)
* Cognitive activity such as imagining moving parts of his/her body or moving through space (e.g. mentally following a map) or mental arithmetic

Occasional breaks of one to two minutes will be provided. During this time, you will remain in the scanner, but you can communicate with the MRI technologist.

If using eye tracking:

You may be asked to participate in a research study examining eye tracking during different

tasks. The eyetracker monitors your eye movements by monitoring you eyes with a

video camera while you are performing a task. Your eye will be illuminated with

an infrared LED (like that used in TV remote controls). The amount of infrared

illumination at your eye is less than the amount outside on a sunny day, and ten to a hundred

times less than the recommended chronic (long-term) exposure levels.

You may be asked to participate in a research study examining eye tracking during different tasks. The eye-tracker monitors your eye movements by monitoring your eyes with a video camera while you are performing a task.

Risks and Inconveniences

The risks involved in this fMRI study are minimal, and are limited to the risks present during routine MRI examinations. When near an MRI scanner, there is a potential for the powerful magnetic field to attract ferromagnetic metallic objects toward the magnet. For this reason, you will be carefully screened for previous exposure to metallic fragments or clips that may be inside your body. Similarly, you will be asked to place all metallic and magnetic objects in your possession (e.g. keys, jewelry, credit cards) in a locker outside the magnet room.

While you are lying in the scanner, you will often hear beeping and knocking noises, some of which may be loud, that are produced by the scanning equipment. Disposable earplugs will be provided to diminish the noise.

You will always be able to communicate with the scanner operator throughout the study. Before and after individual scans, there will be breaks during which you will be able to talk with the operator through an intercom system. During a scan, the equipment noise will make it difficult to use this intercom, but you will also have at all times a signal bulb that you can squeeze to let the operator know that you would like speak to them. If you ever squeeze this, the operator will immediately stop the scan, and you will be able to use the intercom once again. If at any time you feel uncomfortable or unwilling to continue, no matter what the reason, you can request to immediately stop the study, and the operator will remove you from the scanner. The operator can observe you from the next room at all times during the study, so we would also stop the scan if we ever see you in any obvious distress. Because you will not be physically restrained in the scanner, you could even pull yourself out if necessary; however, we ask that you instead use the intercom or squeeze bulb to tell us to remove you.

The bore of the magnet is a small space and some people may feel claustrophobic. Most participants rapidly grow accustomed to the space, but please let us know if you feel uncomfortable, and remember that you can always choose to leave the scanner at any time.

While the scanner is operating, there is a small chance that the rapidly changing magnetic fields could cause peripheral nerve or muscle stimulation. Only a small percentage of participants ever experience this stimulation, which is felt as a slight tingling sensation or a muscle twitch, most likely in the upper arms or torso. While these sensations may be startling, they are not dangerous or a health risk and they have no lasting consequences. The sensations will immediately stop at the instant when the scan ends. If these sensations are distracting or even uncomfortable, please squeeze the signal bulb to alert the scanner operator. You will then have the opportunity to choose to withdraw from the study or perhaps to continue the study using different scan settings that should avoid further stimulation.

In rare cases, contact with the conductive materials such as wires or other metallic objects, or skin-to-skin contact that forms conductive loops may result in excessive heating and burns during the experiment. The operators of the MRI scanner will take steps, such as using foam pads when necessary, to minimize this risk. Tattoos with metallic inks can also potentially cause burns. Any heating or burning sensations during a scan should be reported to the operators immediately and they will discontinue the scan.

To reduce potential back or neck pain due to lying still in the scanner, cushions and pads designed to better disperse your weight for the scan duration will be used under your knees and neck and around your body.

Although there is no known or anticipated risk to a fetus, you will not be allowed to participate in the study if there is any possibility you are pregnant. Beyond the risks described above, there are no known long-term physical risks associated with fMRI studies.

If using eye tracking:

When the eye-tracker system is being used, your eye will be illuminated with an infrared LED (like that used in TV remote controls). Infrared is invisible to human eyes, so you will not see the light. The amount of infrared illumination at your eye is less than the amount outside on a sunny day, and ten to a hundred times less than the recommended chronic (long-term) exposure levels, so it will not cause any harm to your eyes. However, because infrared light can increase the evaporation rate of tears, it may result in a dryness sensation. Blinking will eliminate the dryness sensation. If at any time you are uncomfortable, simply let the experimenter(s) know, and they will turn off the eye-tracking hardware.

Incidental findings

The magnetic resonance imaging (MRI) scan you will receive during the course of this study is for research purposes only. It is not a clinical scan intended for diagnostic or therapeutic purposes. The Brain Imaging Facility is a research center. It is NOT a clinical MRI facility in a hospital. There are no neuroradiologists at the Brain Imaging Facility, therefore the staff are unable to make any medical comments about your scan. Should you want to know if your scan is normal or abnormal, the staff will not be able to tell you. In the rare event someone on the research team suspects an anomaly, data will be sent to a neuroradiologist for examination. You have the right to decline this evaluation

There is a chance, however, that, in the course of this research scanning protocol, we observe an anomaly (e.g. tumor or cyst) in one or more of the MRI images. If this happens, your images will be sent to a trained radiologist for further investigation and you may be informed of the results. An anomaly does not necessarily indicate the presence of any disorder. Because our MRI scans are for research purposes only, they may be inadequate for the purpose of clinical diagnosis. Additionally, as researchers, we are not trained to clinically interpret MRI data. However, we feel it is important to inform you of any observations, as we cannot rule out the possibility that this anomaly may require medical advice. If you prefer not to be informed of anomalous findings, you must check the box below.

I prefer NOT to be informed of any anomalous findings.

General confidentiality.

Only the main investigator will be able to link your name to your data. Anonymous data (without your name) may be presented at research meetings and published in research journals. In addition, anonymous images may be provided to third parties (such as the manufacturer of the scanner) for use in connection with its product development and marketing activities.

The research study you are participating in may be reviewed for quality assurance to make sure that the required laws and guidelines are followed. If chosen, (a) representative(s) of the Human Research Ethics Program (HREP) may access study-related data and/or consent materials as part of the review. All information accessed by the HREP will be upheld to the same level of confidentiality that has been stated by the research team.

Benefits

You will receive no direct benefit from participation in this study. However, in exchange for your participation, you will be paid $20/hr for participation in a scanning session. A "session" includes all preparation in addition to actual scan time. If a session is terminated early due to participant discomfort, scanner malfunction or other unforeseeable event, you will nonetheless be paid for the session.

In addition to financial remuneration, you may also draw satisfaction from the knowledge that information generated by this study may help promote better understanding of how the human brain is organized and functions. This knowledge may eventually lead to improvements in the diagnosis, treatment and cure of neurological and psychiatric illness.

Future Research

I authorize the MRI facility to contact me about future research within the MRI research facility in the Department of Psychology. If I agree, a researcher may contact me and tell me about the research. At that time, I can decide whether or not I am interested in participating in a particular study.

I agree to be contacted about research studies conducted at the MRI facility.

I authorize the MRI facility to use my data in future research within the MRI research facility in the Department of Psychology.

Consent

* I understand that there may be no direct benefit to me from my participation in this study other than the monetary payment as described above.
* I understand that my participation will not cost me anything other than the time and effort involved.
* I understand that this is not a clinical scan and cannot be reliably used for diagnostic purposes.
* I understand that the information obtained from this study will be confidential. It will be available to the investigators performing the study. My identity will remain anonymous in any publications resulting from this study.
* I understand that by signing this agreement, I do not waive any legal rights or release University of Toronto or its agents from liability.
* I understand that this consent is voluntary and I may withdraw from this study at any time without penalty.
* I understand that the research study I am participating in may be reviewed for quality assurance to make sure that the required laws and guidelines are followed. If chosen, (a) representative(s) of the Human Research Ethics Program (HREP) may access study-related data and/or consent materials as part of the review. All information accessed by the HREP will be upheld to the same level of confidentiality that has been stated by the research team
* I understand that if I wish further information regarding my rights as a research subject, I may contact the Office of Research Ethics at the University of Toronto by telephoning (416) 946-3273 or by sending email to [ethics.review@utoronto.ca](mailto:ethics.review@utoronto.ca).
* I understand that if I wish further information regarding this research study I may contact Study PI, by telephoning (XXX) XXX-XXXX or by sending email to XXXXXXX

I hereby give my consent to participate in this research.

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Signature of Participant Name of Participant (print)

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Signature of Investigator Name of Investigator (print)

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Date

*\*\* Remember- Original consent forms must kept by the labs; copies can be filed with the Toronto Neuroimaging Facility in the filing cabinet in the participant waiting room.*

**THIS PAGE MUST BE PROVIDED TO THE SUBJECT**

Please keep this sheet in case you have any questions about this research project.

1. TITLE OF RESEARCH:

2. For answers to any questions you may have about this research, contact:

PRINCIPAL INVESTIGATOR:

Include PI Contact inforamtion

3. For answers to any questions you may have about your rights as a research subject, contact:

Office of Research Ethics

Phone: (416) 946-3273

Email: [ethics.review@utoronto.ca](mailto:ethics.review@utoronto.ca)