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**University College Cork, Ireland**  
Coláiste na hOllscoile Corcaigh

## The IEMO 80+ Thyroid Trial

- I've read the information letter. I was able to ask additional questions. My questions have been answered satisfactorily. I have had enough time to consider my participation.
- I understand that my participation is completely voluntary and that I am free to withdraw at any time, without giving any reason.
- I agree that my GP and/or treating specialist are informed about my study
- I agree that my GP and/or treating specialist are informed about the results of the blood tests
- I agree to using my data for the aims described in the information letter
- I agree with participating in the selection phase of this study.

**Last name and initials:** .....

**Address:** .....

**Postal code:** .....

**City:** .....

**Sex :** ... male ... female

**Date of birth:** .....

**Date:** .... .. **Phone:** .....

**Signature:** .....