



THE UNIVERSITY OF  
**NOTRE DAME**  
A U S T R A L I A

**SCHOOL OF MEDICINE, FREMANTLE**

*Doctor of Medicine*

**Practical Participation Consent - Students**

Please ensure you read this form and tick each box to confirm you have read and understand the consent form.

I,

Student name:

Student ID:

confirm that I have read and understood the information in the unit materials pertaining to practical participation and laboratory safety.

I hereby consent to participate in a number of procedures and practices for medical teaching and learning that involve measurement and or manipulation of my physical condition, during one or more practical sessions at the University of Notre Dame, Australia.	
I understand that during these procedures wherever they are conducted, a Notre Dame staff member will always be present.	
I further understand that the procedures used are all standard laboratory or medical procedures and none of them have demonstrated any adverse biological effect.	
I further understand that the results of these procedures may be made available anonymously to other members of my class.	
I understand that the results of these procedures are for <u>teaching purposes only</u> and are <u>not intended</u> to provide either me or my doctor with <u>diagnostic information</u> .	
I understand that by their nature some of these procedures can deliver diagnostic information and therefore there is a possibility that during an examination an abnormality may be observed. If this occurs, the supervising staff member will discuss this confidentially with me and suggest I contact my GP to investigate further.	
I understand that the need to undertake the nominated procedures will be advertised through the publication of the actual practical sessions (via the website) prior to the event and so I can evaluate my participation in each procedure.	
I understand that I am free to withdraw my consent to participate in any procedure at any time.	
No personal details or data generated will be stored or disseminated outside of the specific practical session.	

Please be aware that the procedures carried out in this course are for educational purposes only. Our purpose is the teaching of specific learning objectives via the observation of anatomical structures and physiological results. None of the techniques used are undertaken as a formal diagnostic procedure and as such will not cover the full range of results that a diagnostic procedure is designed to assess, or any pathology which may be present. If you are having any medical or health concerns, these procedures do not, in any way, replace an appointment with your doctor and diagnostic medical testing for your specific condition.

I have read the above statement and hereby agree to participate in a number of procedures for teaching purposes only, as part of the medical course at the University of Notre Dame, Australia.

Date:

Has not been actioned