

## Add subject consent

## INSTRUCTIONS:

Please complete the form below. Required questions are in bold. When all required questions are complete click SAVE or, if available, SAVE NEXT. Based on your responses, additional questions may be required or some answers may need to be corrected.

Subject identifier:

**1. Screening identifier:**

**2. In which type of clinic was the patient screened:**

HIV Clinic

NCD Clinic

**3. First name:**

(Encryption: RSA local)

**4. Surname:**

(Encryption: RSA local)

**5. Initials:**

(Encryption: RSA local)

**6. Gender:**

Male

Female

**7. Language of consent:**

Luganda

Runyakitara

English

The language used for the consent process will also be used during data collection.

**8. Is the participant literate?**

Yes

No

If 'No' provide witness's name on this form and signature on the paper document.

**9. Witness's last and first name:**

Required only if participant is illiterate. Format is 'LASTNAME, FIRSTNAME'. All uppercase separated by a comma.

**10. Consent date and time:** **Date:**  Today

**Time:**  Now

Note: You are 9 hours behind server time.

**11. Date of birth:**  Today

Note: You are 9 hours behind server time.

**12. Is date of birth estimated?**

No

Yes, estimated the Day

Yes, estimated Month and Day

Yes, estimated Year, Month and Day

If the exact date is not known, please indicate which part of the date is estimated.

**13. Identity number:**

Use Country ID Number, Passport number, driver's license number, Mobile, etc

**14. What type of identity number is this?**

Country ID number

Driver's license

Passport

Clinic number

Hospital number

Country ID receipt

Mobile number

Other

**15. Confirm identity:**

Retype the identity number (Encryption: RSA local)

**16. Is the participant under involuntary incarceration?**

Yes

No

( If 'Yes' STOP participant cannot be consented )

## Review Questions

The following questions are directed to the interviewer.

**17. I have reviewed the consent with the participant:**

Yes

No

If no, participant is not eligible.

**18. I have answered all questions the participant had about the study:**

Yes

No

If no, participant is not eligible.

**19. I have asked the participant questions about this study and the participant has demonstrated understanding:**

Yes

No

If no, participant is not eligible.

**20. I have verified that the participant has signed the consent form:**

Yes

No

If no, participant is not eligible.

**21. I have provided the participant with a copy of their signed informed consent:**

Yes

No

Yes, but subject declined copy

If declined, return copy with the consent

Audit ([Show](#))

Cancel

SAVE