Appendix F: Information and Consent form

Information on Masters Research Project

This study is to determine whether all the necessary tests and evaluations was done for proper diagnosis of ADHD. This study is also to determine the factors that influence the prescribing of Ritalin® in primary school children in Polokwane.

The final report will be made available to all participants.

CONSENT

Statement concerning participation in a Research Project.

Name of Study:

Factors that influence the prescribing and use of methylphenidate for Attention Deficit Hyperactivity Disorder in primary school children in Polokwane

I have read the information on the proposed study and was provided the opportunity to ask questions and given adequate time to rethink the issue. The aim and objectives of the study are sufficiently clear to me. I have not been pressurised to participate in any way.

I understand that participation in this Study is completely voluntary and that I may withdraw from it at any time and without supplying reasons. This will have no influence on the regular treatment that holds for my child's condition neither will it influence the care that she/he receive from her/his regular doctor.

I know that this Study has been approved by the Research, Ethics and Publications Committee of MEDUNSA. I am fully aware that the results of this Trial / Study / Project* will be used for scientific purposes and may be published. I agree to this, provided my privacy is guaranteed.

I hereby give consent to participate in this Study .

…….. ……..
Name of patient Signature of patient or guardian

…….. …… ……..
Place Date Witness

Statement by the Researcher:

I provi ded verbal and/or written information regarding this/Study
I agree to answer any future questions concerning the Study as best as I am able
I will adhere to the approved protocol

…… …… ……
Researcher Signature

…… ……
Date Place