



重要信息

IMPORTANT INFORMATION

本文件必须以您的语言书写

THIS DOCUMENT MUST BE WRITTEN IN YOUR LANGUAGE

参加研究同意书 – 简表

Consent Form to Participate in Research – Short Form

研究名称

Title of Research Study

研究者姓名

Names of Researchers

研究者电话号码

Telephone Numbers of Researchers

如果您因参加研究而发生紧急事故，请致电 911。
**In case of an emergency related to your participation
in this research, please call 911.**