**Study Title**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Participant Study ID** | **Consent obtained for:** | **Date of verbal consent**  **discussion** | **Name of individual conducting the verbal consent discussion** | **Signature of individual conducting the verbal consent discussion** |
|  | All questions asked by the participant were addressed  A copy of the LOI(s) was offered/provided to the participant  Verbal consent was obtained for study participant  Explicit verbal consent obtained for:  Audio Recording Video Recording  Use of Quotes |  |  |  |
|  | All questions asked by the participant were addressed  A copy of the LOI(s) was offered/provided to the participant  Verbal consent was obtained for study participant  Explicit verbal consent obtained for:  Audio Recording Video Recording  Use of Quotes |  |  |  |
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