

**Study title:** Gut Health and Diet Study.

**Research team: Angela Genoni (chief researcher)**

Assoc. Prof. Philippa Lyons-Wall (co-supervisor),  
Assoc. Prof. Amanda Devine (co-supervisor),  
Assoc. Prof. Mary Boyce (co-supervisor),  
Dr. Johnny Lo (co-supervisor),  
Dr. Claus Christophersen (co-supervisor)

**Informed Consent**

By consenting to participate in the study, I acknowledge the following:

- I have been provided with a copy of the Information Letter to Participants, explaining the research study
- I have read and understood the information provided.
- I have been given the opportunity to ask questions and I have had any questions answered to my satisfaction.
- I am aware that if I have additional questions I can contact the research team.
- I understand that participation in the research project will involve:
  - Completing an examination to record height, waist circumference, body fat percentage and blood pressure. The Bod Pod chamber will be used to estimate my levels of body fat and muscle. It involves sitting inside an air chamber for approximately 2 minutes. I will be required to wear tight fitting bathers or gym wear.
  - Completing a diet history and food frequency questionnaire interview with the chief researcher. This interview will take approximately 45-60minutes.
  - Completing a questionnaire on your physical activity level. This questionnaire will take approximately 5-10 minutes.
  - Completing a questionnaire on your bowel health. This questionnaire will take approximately 5-10 minutes.
  - Completing blood tests at a Pathwest collection centre. These blood tests will require attending a Pathwest pathology centre after an overnight fast.
  - Collecting a 24 hour urine sample. This involves collecting all your urine for a 24 hour period.
  - Collecting a 48 hour stool sample. This involves collecting all bowel movements for a 48 hour period. Freezers for will be provided for storage of the sample.
  - Completing a 3 day weighed food record. I will be given scales, measuring cups, spoons, recording sheets and instructions by the researcher. I do not need to alter the way I eat for this three day period.
- I understand that the information provided will be kept confidential, and that the identity of participants will not be disclosed without consent.

- I understand that the information provided will be used for the purposes of this research project and understand how the information is to be used.
- I understand that I am free to withdraw from further participation at any time, without explanation or penalty.
- I understand that data and/or samples collected for the purposes of this research project may be used in further approved research projects, and that my name and other identifying information will be removed.
- I freely agree to participate in the study.

**YOUR NAME:** .....

(please provide full name)

**SIGN:** .....

**DATE (dd/mm/yyyy):** .....

**WITNESS NAME:** .....

(please provide full name)

**SIGN:** .....

**DATE (dd/mm/yyyy):** .....

