

UNIVERSITY OF CALIFORNIA, BERKELEY



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Consent to Participate in a Research Study: Spatial Representations and Attention

INVESTIGATOR: Lynn C. Robertson, Ph.D., Department of Psychology (510) 642-6266.

PURPOSE: You are invited to participate in a research study concerning the brain's involvement in visual perception. The purpose of the study is to determine how the ability to perceive various objects and their properties are represented in the human brain.

PROCEDURES: To be a participant in this study, you are required to have no medical history of neurological events that could affect perceptual functions (e.g., epilepsy, head trauma as result of falls, etc.) and to have normal or corrected-to-normal visual acuity. On your first visit, you may be given a standard visual acuity and basic mental function test to confirm this. If administered, these tests will include your perceptual functions (e.g. color vision, acuity, visual fields) and standard neuropsychological tests (e.g. copying patterns, reading text of various sizes, and naming drawn objects). You may also be asked to describe any visual distortions you may have experienced in the past few years and whether you have a neurological history of head trauma. If we find you eligible to participate, Professor Lynn Robertson or one of her associates will administer tests where you will be shown patterns and asked to respond to them either by pressing a key or vocal response. Depending on the study you are in, you may be asked to return to participate in similar tests. The tests are administered in blocks of approximately 100 trials. Typically, several blocks are run in a session that lasts 30-45 minutes.

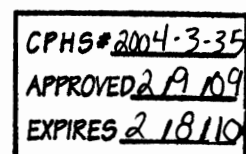
BENEFITS: The results of this study will not help you directly but you may gain a sense of satisfaction that you were involved in a scientific investigation and have contributed to a scientific knowledge. By doing this research, we hope to gain a better understanding of spatial representation, visual perception, and attention. This may lead to a benefit for those with deficits in those areas if treatments can be developed to aid their condition.

RISKS: There are no anticipated risks involved in this study, though you may become somewhat bored with the procedure. While there is a small chance that the confidentiality of the information collected could be compromised, we will take care to prevent this from happening.

CONFIDENTIALITY: All information that we obtain from you is confidential. We will store the records in a locked cabinet and/or on a password-protected computer that is used for internal purposes. Only lab members will have access to the data. A code number will be used to identify your records in our data analysis. The information linking your name to its code number will be kept in a separate locked location. Only my staff and I will have access to this information. The scientific information obtained from these experiments may be published in scientific papers, but your name will not appear in any public documents. If we find you are ineligible for the study, any information collected from the screening session will be destroyed.

COMPENSATION: By participating in this study you will receive 1 RPP credit per hour or \$12.00 per hour if you are not a Psychology subject pool participant. If you travel to the laboratory from a long distance, you will be reimbursed for travel expenses and any expenses incurred due to participation in the study (e.g. meals, accommodations).

RIGHT TO REFUSE OR WITHDRAW: Please understand that your participation in the research is voluntary and that you are free to withdraw your consent and discontinue participation in the research at any time. However, if you are in the Psychology Subject Pool, you will not receive the one-hour credit if you do not complete the study. Note that if you participate throughout the study, you may refuse to answer any question(s) that might make you feel uncomfortable and still receive full credit.



QUESTIONS: If you have any questions about the study, please contact Dr. Lynn Robertson or one of her associates at the Psychology Department, University of California, Berkeley, (510) 632-6266 or the Veteran's Administration Northern California System of Clinics, Martinez, CA 94553, (925) 370-4104 or after hours at (925) 372-2889. If you have any questions about your rights or treatment as a participant in this research project, please contact the University of California at Berkeley's Committee for Protection of Human Subjects at (510) 642-7461, or email subjects@berkeley.edu.

If you agree to participate please sign below. You can keep the other copy of this form for your own records.

I have read the above and agree to participate in this research.

(Signature of Participant)

(Date)

(Signature of Investigator)

(Date)

