



**JAWATANKUASA ETIKA UNIVERSITI UNTUK  
PENYELIDIKAN MELIBATKAN MANUSIA (JKEUPM)  
UNIVERSITI PUTRA MALAYSIA, 43400 UPM SERDANG,  
SELANGOR, MALAYSIA**

## **FORM B1: RESPONDENT'S INFORMATION SHEET AND CONSENT**

Please read the following information carefully and do not hesitate to discuss any questions you may have with the researcher.

### **1. STUDY TITLE :**

**Effectiveness of nosocomial infection control educational module for nurses in public hospitals in Azal Region, Yemen**

### **2. INTRODUCTION:**

Nosocomial infection constitutes a global health problem, and is considered as one of the leading causes of increased morbidity and mortality. Nursing education related to infection control measures can help nurses to make informed and therapeutic decisions thereby prevent or reduce nosocomial infections. Hence, it helps them to maintain a high quality of care and protect themselves, their patients and visitors as well. Therefore, this study will be carried out to evaluate the effectiveness of a newly developed educational module on nosocomial infection control measures for nurses in public hospitals in Azal Region, Yemen.

### **3. WHAT WILL YOU HAVE TO DO?**

You will attend teaching sessions and later answer questions and perform practical tasks according to the teaching module.

### **4. WHO SHOULD NOT PARTICIPATE IN THE STUDY?**

This study is offered to Yemeni nurses working in public hospitals. If you do not fulfill these criteria, you need not participate in this study.

### **5. WHAT WILL BE THE BENEFITS OF THE STUDY:**

#### **(a) TO YOU AS THE SUBJECT?**

This study will help you to improve your knowledge on nosocomial infection and its control measures.

#### **TO THE INVESTIGATOR?**

This study will help the researcher and module coordinator to improve the teaching module on nosocomial infection to nurses.

#### **6. WHAT ARE THE POSSIBLE RISKS?**

There is no possible risk, because this study will only use questionnaire as a tool to collect data from participants.

#### **7. WILL THE INFORMATION THAT YOU PROVIDE AND YOUR IDENTITY REMAIN CONFIDENTIAL?**

Yes, confidentiality will be maintained during this study. Your identity will be kept anonymous.

#### **8. WHO SHOULD YOU CONTACT IF YOU HAVE ADDITIONAL QUESTIONS DURING THE COURSE OF THE RESEARCH?**

If you have any questions during the course of this research, please contact the researcher as below:

Gamil Ghaleb Ahmed Nasr

Al-Steen South Street – Sana'a/Yemen

Head phone: 00967733190003 or 00967777157730

E-mail : alrubaiee73@gmail.com

Please initial here if you have read and understood the contents of this page\_\_\_\_\_

## 9. CONSENT

I ..... Identity Card No. ....  
address.....  
.....hereby voluntarily agree to take part in the research stated  
above \*(clinical /drug trial/video recording/ focus group/interview-based/ questionnaire-based).

I have been informed about the nature of the research in terms of methodology, possible adverse effects and complications (as written in the Respondent's Information Sheet). I understand that I have the right to withdraw from this research at any time without giving any reason whatsoever. I also understand that this study is confidential and all information provided with regard to my identity will remain private and confidential.

I\* wish / do not wish to know the results related to my participation in the research

I agree/do not agree that the images/photos/video recordings/voice recordings related to me be used in any form of publication or presentation (if applicable)

\* delete where necessary

Signature .....  
(Respondent)

Signature .....  
(Witness)

Date :.....

Name :.....

I/C No. :.....

I confirm that I have explained to the respondent the nature and purpose of the above-mentioned research.

Date .....

Signature .....  
(Researcher)