The informed consent form

Lorestan University of Medical Sciences & Health Services

School of Nursing and Midwifery, Khorramabad

Dear Sir / Madam

You are invited to participate in a research project. We believe in the importance of this research, however, before you make your decision, we must make sure that you know the purpose of this research and the benefits of participating in it. Please read the following text carefully. Ask any questions you have and Try to resolve any ambiguity.

I am satisfied to participate in this research and the following is approved by me:

1-The research project entitled "The effect of knowledge brokering on the empathy of nurses with cardiac patients" is approved by Lorestan University of Medical Sciences and will be performed by Miss. Atefeh Galehdarifard under Dr. Mojgan Khademi's supervision. The aim of this project is determining the effect of knowledge brokering on nurses' empathy with cardiac patients.

2- The method of conducting the research was described for me both verbally and in writing.

3. I was fully informed of the potential positive and negative effects of the research which were described by the executor of the project for me.

4. I know that my information, including my personal and identity information and my contact number are solely given to the senior scholar and she is not allowed to publish my personal information except with my written permission. They can only publish the overall and collective results of this research as articles, reports and so on.

5- The senior scholar has provided me with her contact information including her address and phone number. If there are any problems or a questions regarding my participation in the project, I will be able to share them with the research team and ask for guidance or to know the latest information about the study. Address1: Kamalvand, Lorestan University of Medical Sciences, Nursing and Midwifery Faculty of Khorramabad, address2: ShahidRahimi Hospital, phone number: 09165475162.

6. The executor of the project informed me that the knowledge brokering method used in this study is approved by the relevant organizations in the Ministry of Health and Medical Education of the country and its possible side effects were described by the presenter. Meanwhile, the Executor stated that by date 4/21/2019, my cooperation with this project will end.

I approve the six items of the informed consent text and the points indicated below.

Participant's Name and Signature

I, Atefeh Galehdarifard, a MSN nursing student who has given the above informed consent text to Mr. / Ms. ..... on date ..... and has received it on date ....., am committed to all its provisions and am obligated to implement its provisions. Meanwhile, I commit myself to do whatever is appropriate for the participants if any problems occurred to them.

I approve the six items of the consent text and the points indicated below.

Signature of the Researcher