



FORM 10.05
IRB Form
PNU Institutional Review Board
Survey Cover Page / Consent
Effective Date:

Title: Evaluating a Pharmacy Student-Led Medication Awareness
Campaign: Perceptions and Achievement of Learning Outcomes

You are being asked to voluntarily participate in this survey research study. The purpose of the study is to **explore the perception of undergraduate pharmacy students towards their involvement in medication safety awareness campaign and how its impacted on their learning experience**. You are eligible to participate because **you were involved in medication safety awareness campaign as part of medication safety course**. We expect at least **150** will participate in the survey in **the College of Pharmacy**.

If you agree to participate, your participation will involve completing a survey. It should take no more than **15 min**. You may choose not to answer some or all of the questions. Your name will not appear on your completed survey, and no identifying information is being collected as part of this survey.

Any questions you have will be answered. You may leave the survey at any time before completing it. Whether you complete the survey or not will not affect your health care. There are no known risks from your participation. No direct benefit from your participation is expected. The information may help in **improving the medication safety campaign**. There is no cost to you except for your time. You will not be paid for participation in this study.

Only the study team will have access to the information that you provide, which will remain anonymous. Data from all respondents will be summarized in reports.

You can obtain further information from the principal investigator, **Dr. Ghadah Alshehri**. If you have questions concerning your rights as a research subject, you may call the PNU Institutional Review Board office at irb@pnu.edu.sa

Completing this survey indicates your voluntary agreement to participate. By participating in the survey, you are giving permission for the investigator to use your information for research purposes.

Thank you.

Dr. Ghadah Alshehri

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