## Participant Information Form

**Project Title**

Investigating the effect of exercise on keratinocyte cancer cell lines (Exercised serum skin study)

**Researcher**

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 **Supervisor**

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**Project Aim**

Determine the effect of an acute bout of moderate-intensity cycle ergometry exercise on keratinocyte cells in vitro.

**General Outline of the Project**

The role of exercise as an adjuvant treatment in skin cancer is an area of research which limited, especially in humans with keratinocyte cancer. This study will help us gain an understanding of how exercise affects human skin cancer cells.

The information gained from the research will be used to write a chapter in a thesis, publish a journal article and present at a conference.

This project is funded through Internal Faculty and Institute funding

**Participant Involvement**

Participants who agree to participate in the research will be asked to:

1. Have an initial meeting to go through/sign documents
2. VO2 max testing to measure the participants aerobic capacity
3. Participants will be randomized to either the exercise intervention where they will . Alternatively, participants could be randomized to the control arm of the study where they will be asked to go about daily activities of living for the duration of the intervention.
4. 20ml of blood with be collected from the forearm vein, before, immediately after and 24 hours after the exercise intervention by a trained phlebotomist. A blood sample from a finger-prick will also be collected at these time points by the trained phlebotomist.
5. Participants will be required to return 4 weeks after their for their second trial, where the intervention and blood collection process will be repeated. This will be repeated once more for a third trial.

Participation in the research is completely voluntary and participants may, without any penalty, decline to take part or withdraw at any time without providing an explanation or refuse to answer a question.

**Benefits of Participation**

Participants will receive a report summarizing the general group findings of this study via email. This data will be anonymized. Participants will also receive a $50 e-gift card at the cessation of their intervention.

**Risks of Participation**

Participants may experience minor temporary pain or bruising after the blood collections. Additionally, the VO2 max testing and exercise may be associated with breathing irregularities, syncope and fatigue. However, these activities will be monitored by an exercise physiologist and participants will also be provided water and rest opportunities.

**Confidentiality**

Only the researcher/s will have access to the individual information provided by participants. Privacy and confidentiality will be assured at all times. The research outcomes may be presented at conferences and written up for publication. However, in all these publications, the privacy and confidentiality of individuals will be protected.

**Anonymity**

All reports and publications of the research will contain no information that can identify any individual and all information will be kept in the strictest confidence.

**Data Storage**

The information collected will be stored securely on a password protected computer throughout the project and then stored at the University of Canberra for the required five year period after which it will be destroyed according to university protocols.

**Tissue or Biosample Collection**

Your blood samples will be processed, and the serum will be collected.

We will be using your serum in two ways. We will be investigating what effect exercise has on the whole body, after we have collected these samples, such testing will be conducted in a lab.
The second way we use participants serum will be through application of serum onto keratinocyte cell lines to investigate what effect exercise may elicit. The tests conducted on these keratinocyte cell lines do not analyses your serum.

Aliquots of samples will be kept frozen in a -80°C freezer for the duration of the project, which should not exceed 1 year. They will then be disposed of in a biohazard bin and samples will not be identifiable in anyway.

**Ethics Committee Clearance**

The project has been approved by the Human Research Ethics Committee of the University of Canberra (HREC – insert number here).

**Queries and Concerns**

Queries or concerns regarding the research can be directed to the researcher and/or supervisor.

Contact details are at the top of this form.

If you have any complaints or reservations about the ethical conduct of this research, you may contact the University of Canberra’s Research Ethics & Integrity Unit team via telephone 02 6206 3916 or email humanethicscommittee@canberra.edu.au or researchethicsandintegrity@canberra.edu.au

If you would like some guidance on the questions you could ask about your participation please refer to the Participants’ Guide located at <https://www.canberra.edu.au/research/graduate-research/current-research-students/integrity-and-ethics/ethics/accordion/human-ethics/human-ethics-documents/Agreeing-to-participate-in-research.pdf>

# Consent Form

**Project Title**

Investigating the effect of exercise on keratinocyte cancer cell lines

**Consent Statement**

I have read and understood the information about the research. I am not aware of any condition that would prevent my participation, and I agree to participate in this project. I have had the opportunity to ask questions about my participation in the research. All the questions I have asked, have been answered to my satisfaction.

Please indicate whether you agree to participate in each of the following parts of the research (please indicate which parts you agree to by putting a cross in the relevant box):

□ Complete a questionnaire.

□ Participate in VO2 max testing

□ Participate in and exercise intervention and agree to return for a total of 3 trials, spaced 4 weeks between each trial

□ Agree to provide a finger prick blood sample pre, post and 24 hours after the intervention.

□ Agree to providing a 20ml blood sample pre, post and 24 hours after the intervention.

Name……………………………………………………………………….……………………........…

Signature………….........................................................………………………………

Date ………………………………………………………….

A summary of the research report can be forwarded to you when published. If you would like to receive a copy of the report, please include your mailing (or email) address below.

Name…………………………………………………………………………….…………………………

Email address……………………………………………………………………………………………………

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