Research Consent Form 1

Purpose of this research
We (Robert and Suzanne Mays, researchers) are studying the effects of phantom limbs as they relate to the mind. The purpose of this study is to detect and measure any sensations that may be felt or experienced by subjects when another person’s missing limb is brought near to the subject’s head. Subjects for this study include any individual with normal physical and mental faculties.

Description of this study
If you (the participating subject) consent to participate in this research study, there will be one, and possibly additional, experimental sessions lasting ½ to 1 hour each. You will be seated next to a black opaque screen so that you cannot see behind you but the back of your head will be exposed. During the session, there will a preliminary test to measure the kinds of sensations you may experience. Then there will be a randomized test of up to 20 trials, where you may or may not experience sensations. During each trial, subject M.G. will place her right or left hand near the back of your head, but not touching you, and you will be asked to describe any sensations that you may feel or experience. The sensations may be subtle sensations of warmth, pressure, tingling, visual images, impressions, tones, and the like. You should experience no discomfort or pain during the trials.

For each trial you will be asked to rate the strength of the sensation, from 0 = no sensation to 5 = very strong sensation, and to write down any comments or description you may have of the sensation, for example, where you felt it and what it was like. During the session, there will be trials where you may feel nothing, and there may be several trials in a row where you may feel nothing at all. It is OK for you to report that you felt nothing. During the randomized test, there will be no talking, other than instructions given by the researchers.

We will audio and video record each experimental session and may also photograph some portions. All visual images will be made in a way that does not to include your or subject M.G.’s face.

There are no known or foreseeable risks involved in these experimental procedures.

Expected benefits of the study and use of research results
You will not likely benefit personally from participating in this study. However, this study may potentially clarify the relationship of the mind to the body which could have significant benefits for science and medicine. Such understanding would not likely occur without studies of this sort.

We will retain possession of all test results, photographs, audio and video recordings and forms that you fill out. We may include some of these materials in published reports and scientific journal articles, or may include selections from them in publicly accessible parts of our research web site. We will take care to limit access to photographs and video and audio recordings only to published reports and articles, and to bona fide researchers, or where access is required by law. We may publish the overall results of this study in scientific journals, present them at scientific conferences, or on our research web site.

In all instances of publishing and reporting the results of this study or in allowing access to the primary materials from the study, your identity as a participant in this study will be kept confidential and you will not be mentioned by name, by recognizable photograph or any other means, without your specific written consent.

Voluntary participation, termination of participation and compensation
You are not required to take part in this study; your participation is entirely voluntary. You can refuse to participate now or you can withdraw from the study at any time after having given consent. Similarly, we may choose to terminate the study at any time.
There should be no costs to you for any of the testing done in this study. We will compensate you for your time at a reasonable hourly rate.

**Contact persons**
If you have questions about the research or your rights as a research subject, or if you wish to discuss problems or voice concerns, you may contact either of the researchers, in person, via telephone (Robert cell 919-260-7767, home 919-929-1073) or via email (Robert: mays@ieee.org, Suzanne: suzannemays@gmail.com).

**Affirmation from subject**
I have read all of the above. One of the researchers has explained the study to me and answered all of my questions. I have been told of the possible risks and possible benefits of the study.

I affirm that I am 18 years or older, or if not, my parent or legal guardian has also read this consent form and agrees to my participation in this research.

I understand that I do not have to take part in this study, and my refusal to participate will involve no penalty or loss of rights to which I am otherwise entitled. I may withdraw from this study at any time without penalty or loss of rights.

The results of this study may be published, but my identity will not be revealed.

In case there are problems or questions, I have been told that I may contact either researcher at any time.

I understand my rights as a research subject, and I voluntarily consent to participate in this study. I understand what the study is about and how and why it is being done. I will receive a copy of this consent form.

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<th>Subject’s Signature</th>
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Research Consent Form 2

Purpose of this research
We (Robert and Suzanne Mays, researchers) are studying the effects of phantom limbs as they relate to the mind. The purpose of this study is to detect and measure any sensations that may be felt or experienced by subjects when a person’s missing limb is brought near to the subject’s head. Subjects for this study include any individual with a missing limb and other subjects with normal mental and physical faculties.

Description of this study
If you (the participating subject with a missing limb) consent to participate in this research study, there will be different experimental sessions lasting about 2 hours each. In one experiment, you will stand behind another subject who will have a black opaque screen so that they cannot see you but the back of their head will be exposed to you. During the session for each subject, there will be a preliminary test to measure the kinds of sensations they may experience. Then there will be a randomized test of up to 20 trials. During each trial, you will place your left-hand phantom thumb near the back of their head (the “touch” case) or your right fist near the back of their head (the “no touch” case); in either situation you will not physically touch the other subject. In the “touch” case, you should bring your phantom thumb near enough to “touch” inside of the other subject’s head.

For each trial you will be asked to write down whether the trial was “no touch” or “touch”, approximately what part of the head was “touched” and any comments or observations you may have about that trial, for example, sensations you may have felt. During the randomized test, there will be no talking, other than instructions given by the researchers.

In another experiment, you will touch your phantom limb in two places of an interferometer, an apparatus which uses a laser light to generate interference patterns of light. The laser used in this interferometer is a low power laser pointer similar to those used in lecture presentations or the lasers in supermarket scanners. As a precaution, the laser is shielded and pointed so that the direct beam cannot enter anyone’s eyes. The interferometer itself consists of mirrors which direct the beam of light to produce the interference patterns and is completely safe to touch.

In another experiment, you will be seated behind an opaque screen where your missing limb will be out of your view. Various objects will be placed in the region of your missing limb and you will be asked to describe sensations or impressions, if any, that you feel or experience.

Both you and the other subjects should experience no discomfort or pain during these experiments. At appropriate times in each session, there will be short breaks to sit and rest.

We will audio and video record each experimental session and may also photograph some portions. All visual images will be made in a way that does not to include your or the other subject’s face.

There are no known or foreseeable risks involved in these experimental procedures.

Expected benefits of the study and use of research results
You will not likely benefit personally from participating in this study. However, this study may potentially clarify the relationship of the mind to the body which could have significant benefits for science and medicine. Such understanding would not likely occur without studies of this sort.

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required by law. We may publish the overall results of this study in scientific journals, present them at scientific
conferences, or on our research web site.

In all instances of publishing and reporting the results of this study or in allowing access to the primary materials
from the study, your identity as a participant in this study will be kept confidential and you will not be mentioned by
name, by recognizable photograph or any other means, without your specific written consent.

Voluntary participation, termination of participation and compensation
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now or you can withdraw from the study at any time after having given consent. Similarly, we may choose to
terminate the study at any time.

There should be no costs to you for any of the testing done in this study. We will compensate you for your time at a
reasonable hourly rate.

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I have been told of the possible risks and possible benefits of the study.

I understand that I do not have to take part in this study, and my refusal to participate will involve no penalty or loss
of rights to which I am otherwise entitled. I may withdraw from this study at any time without penalty or loss of
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the study is about and how and why it is being done. I will receive a copy of this consent form.

_________________________________________________________________
Subject’s Signature     Date
_________________________________________________________________
Researcher’s Signature     Date
_________________________________________________________________
Researcher’s Signature     Date