



E.P.I.C. Lift Capacity
Evaluator Certification Program
Informed Consent

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Purpose: The purpose of this research study is to provide your evaluator an opportunity to practice skills that he or she has been trained to perform. A secondary purpose of the study is to develop normative standards for lift capacity in healthy adults, age 18 years to 60 years.

Procedures: You will be asked to complete three short questionnaires and participate in a lift capacity test to determine your “maximum acceptable weight” for lifting. The lift capacity test will be administered to you on two occasions. The questionnaires and each test battery administration are expected to take no more than fifty minutes to complete. Participation is voluntary, and refusal to participate will involve no penalty to you. You may discontinue participation at any time without penalty. Any questions regarding this study may be directed to your evaluator.

Risks: Participation in this research study involves some risks. We have done everything that we can to insure that your involvement will be safe. Your evaluator has been trained and has passed a written test of knowledge. Your evaluator will not test you if you have a medical condition that would not be safe in this circumstance. Finally, the evaluator will test you gradually. Testing will begin at a low level and gradually become more difficult. If, at any time, you believe that you cannot safely or comfortably continue, you may stop. It is likely that you will have some temporary muscle soreness after these tests. The soreness will probably last for one or two days and may be relieved by aspirin, Tylenol, ibuprofen or ice. There is a slight risk that symptoms may last longer or that you may be injured. If you require medical treatment as a result of your participation in this study, the financial responsibility will be yours.

Benefits: The primary benefit from participation in this survey will be the satisfaction gained from knowing that you have helped to contribute to the development of an important new tool in the evaluation of lift capacity.

Confidentiality: Information obtained that can be identified with you will remain confidential.

Agreement: I HAVE READ AND UNDERSTAND THE ABOVE AND AGREE TO PARTICIPATE. I UNDERSTAND THAT I MAY WITHDRAW AT ANY TIME.

Signature: _____

Printed Name: _____

Address: _____

City/State/Zip: _____ Telephone: _____

Witness: _____ Date: _____