



Study Title: Self-Reported Use of Vital Signs in the Adult Outpatient Setting

Principal Researcher: Joshua J. Peters, SPT

Faculty Sponsor: Ellen Donald MS, PT

The purpose of the study is to examine information regarding the measurement of vital signs performed by PTs in the adult outpatient setting. This research is important because little is known about PTs behaviors, beliefs, or the demographic factors related to this topic. I am asking you to take part in the study because you are currently employed as a licensed PT practicing at an adult outpatient clinic in the state of Florida. **As a quality measure, please answer yes or no to each of the following questions:**

- 1. Are you *currently* a licensed physical therapist practicing at an adult outpatient clinic?**
- 2. Do you *currently* practice in the state of Florida?**
- 3. Have you practiced at an adult outpatient clinic for *at least* 6 months prior to this date?**

If you answered “no” to *any* of the above questions, you do not meet the eligibility requirements for participation in this study. Please delete this email and thank you for your consideration.

If you answered “yes” to *each* of the questions, you are eligible to participate in this study.

Click [HERE](#) to be taken to the survey.

(NOTICE: By clicking the above link you are consenting to participate in this research survey. Please continue reading for more information.)

You are being asked to participate in an online survey for a research project conducted through Florida Gulf Coast University. This research is being conducted as a program requirement for successful completion of the Doctor of Physical Therapy degree. The University requires that you give your approval to participate in this project. You must be at least 18 years old to take this survey.

Your participation in the study is completely voluntary. If you decide to participate now you may change your mind and stop at any time, for any reason, without penalty or loss of any future services you may be eligible to receive from the University or the Florida Physical Therapy Association. You can choose to not answer an individual question or you may skip any section of the survey by moving to the next question.

If you agree to be part of the research study, you will be asked to complete an online survey about your practice behaviors and beliefs regarding measuring heart rate (HR), blood pressure (BP), and pulse oximetry (SpO₂). The survey also includes questions about your demographic data. We expect the survey will take a maximum of 10-15 minutes to complete. The survey will remain available for 21 days and can be completed in more than one session.

Your participation will be kept anonymous. However, working with email or the internet has the risk of compromising privacy, confidentiality, and/or anonymity. Despite this possibility, the risks to your physical, emotional, social, professional, or financial well-being are considered to be 'less than minimal' by completing the survey.

Although your participation in this research may not benefit you personally, it will help us understand current practices, beliefs, and demographic factors related to measuring vital signs. We believe this study will provide valuable information about what is actually occurring in clinical practice. This knowledge will serve as



ONLINE SURVEY CONSENT FORM

a foundation for understanding the factors influencing clinical decision making. It is our sincere hope that the data collected from this study will be used to help guide clinical practice and ensure patient safety.

If you join the study, we will make every effort keep your information confidential and secure by taking the following steps. Your name and email address will remain confidential and will be stored on an account through SurveyMonkey.com. We will not have access to your name or email address at any time and all completed surveys will be assigned a number. All data, including the data analysis, will be transmitted via a secure browser. Once the data analysis is complete, the SurveyMonkey.com account will be deleted. However, despite these safeguards, there is the possibility of hacking or other security breaches that could compromise the confidentiality of the information you provide. Thus, it is important to remember that you are free to decline to answer any question that makes you uncomfortable for any reason. Click on the links below to view copies of Survey Monkey's privacy policy and security statement.

[Privacy Policy](#)
[Security Statement](#)

We will not release information about you unless you authorize us to do so or unless we are required to do so by law. If results of this study are published or presented at a professional meeting, no information will be included that would make it possible to identify you as a study participant.

You will not be paid to take part in this study. If you have any questions about this study, you may contact Professor Ellen Donald MS, PT at 239-590-7531. If you have any questions about your rights as a participant in this research, or if you feel you have been placed at risk, you can contact the Chair of the Human Subjects' Institutional Review Board through Sandra Terranova, Office of Research and Sponsored Programs, at 239-590-7522.

Statement: I have read the preceding information describing this study. I am 18 years of age or older and freely consent to participate in the study. My decision to participate or to decline participating in this study is completely voluntary. I understand that I am free to withdraw from the study at any time. I am aware of my option to not answer to any questions I choose.

I am *currently* a licensed physical therapist practicing at an adult outpatient clinic located in the state of Florida, and have been practicing in this setting for *at least* 6 months prior to participating in this study.

I understand that it is not possible to identify all potential risks. I believe that reasonable steps have been taken to minimize both the known and potential but unknown risks. The submission of the completed survey is my informed consent to participate in the study.

If you would like a copy of the consent form, print a copy before continuing.

By clicking the survey link [HERE](#) you are consenting to participate in this research survey. If you do not wish to participate please disregard this message.

Thank you for your time,
Joshua J. Peters, SPT