

Participant Consent Form

Title of Study:

“Epidemiology, antibiotic resistance, and molecular detection of blaOXA and blaCTX-M Genes in ESBL-Producing Escherichia coli from urinary tract infections in Jordanian hospitals”

Principal Investigator:

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Introduction

You are invited to participate in a research study that aims to investigate the spread, antibiotic resistance patterns, and genetic markers (blaOXA and blaCTX-M) of Escherichia coli strains causing urinary tract infections in Jordanian hospitals. Your participation will help us better understand the resistance mechanisms of these pathogens, which is crucial for improving treatment strategies and infection control.

Purpose of the Study

This study aims to:

- Determine the prevalence of ESBL-producing E. coli in urinary tract infections.
- Analyze antibiotic resistance profiles.
- Detect the presence of blaOXA and blaCTX-M genes using molecular methods.

Participation and Procedures

If you agree to participate, your urine sample will be collected and analyzed.

- Laboratory testing will include bacterial culture, antibiotic susceptibility testing, and molecular gene detection.
- No personally identifiable information will be linked to your sample.
- The study will not affect the medical treatment you receive.

Voluntary Participation

Participation is entirely voluntary. You may withdraw at any time without any consequences to your medical care or treatment.

Risks and Benefits

Risks:

There are no significant risks involved. The only procedure is routine urine collection.

Benefits:

There are no direct benefits to you. However, the data obtained may benefit public health by improving understanding and management of antibiotic resistance.

Confidentiality

All information collected will remain strictly confidential. Data will be anonymized, and results will be used for research purposes only. Your identity will not be disclosed in any publication or report resulting from this study.

Consent

By signing below, you acknowledge that:

- You have read and understood the information provided above.
- You have had the opportunity to ask questions.
- You voluntarily agree to participate in this study.

Participant's Name: _____

Signature: _____

Date: _____

Researcher's Name: _____

Signature: _____

Date: _____