## Annexure 8

## INFORMED CONSENT LETTER FOR BIOCHEMICAL ESTIMATIONS

Dear Parents,

As you all know that we are conducting a study on your wards, for which you have given your consent. We have finished with the first phase of the study, i.e., gathered information about their dietary and lifestyle behaviors through a questionnaire. In the second phase we have taken their anthropometric measurements (height, weight, waist circumference and hip circumference) and classified them into overweight and obese.

In the consent letter, we had already mentioned that those children who would fall in one of these categories will have to undergo certain biochemical estimations (fasting lipid profile and fasting glucose test). These tests are important as it will reflect the blood cholesterol levels and blood glucose levels. High levels of these biochemical parameters are the main risk factors for chronic diseases. Now, as your child falls in one of these categories, so we request parents or guardians to accompany the child, as venous blood is required. Since we have to test fasting lipid profile and fasting glucose levels the child should come empty stomach (overnight 10-12 hours fasting) in the morning. After the tests, the child will be provided with some refreshments in the school.

The biochemical tests are being carried out in the school premises, in coordination with THYROCARE, an internationally reputed laboratory. The blood samples will be collected by a trained lab technician using disposable syringes.

Therefore, we request you to please help us in carrying out these estimations on your ward on 1 March (Saturday), 7.00 am.

Principal				Vice Principal		
Signature o	of the paren	ts/ guardian:				
Contact number:						
Name Cla	of ss:	the	student:		<del></del>	