



Consent to Participate in the Sixth Dimension Lifestyle Impact Health Study

Title of Study: Life Style Impact Health Study

Researcher: Dr. Scott Baird

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Introduction:

You have opted in to be a part of the Lifestyle Impact Study being conducted by Sixth Dimension, LLC, and Dr. Scott Baird in cooperation with ZYTO and Utah Valley Gastroenterology. This study will answer the following questions:

1. Are lifestyle choices a leading cause of poor health in American adults?
2. Are youth and children being socialized to make poor health choices by adults?
3. Can changes in lifestyle mitigate or even reverse negative health effects?
4. Are adults sufficiently informed to make health decisions about diet and nutrition?

You were selected as a possible participant because of the health concerns you are currently experiencing.

We ask that you read this form and ask any questions that you may have before agreeing to participate in the study.

Purpose of Study:

The purpose of the study is to provide a literature review on the lifestyle choices that are the primary cause of death and disease including but not limited to: heart disease, type II diabetes, and obesity. This study will hypothesize that simple and doable lifestyle changes in diet and exercise can rapidly re-establish positive health markers.

Included elements of the study are:

- Testing the knowledge, skill and attitude of the participants as it relates to current food science research. (Our participants may be basing their decisions on old and inaccurate information and therefore cannot effectively make good decisions relating to nutrition.)
- A central focus on nutrition and modest exercise (e.g. walking 30 minutes daily)
- An emphasis on sleep and gratitude exercises.
- Analyzing the trajectory of individual health trends as measured by

- pre/post blood test results and physical examinations.
- Testing the influence of coaching to affect understanding, motivation, and performance-adherence to principles that will bring lasting positive results.

Ultimately, Dr. Baird's research results may be published in commercial and non-profit media outlets.

Description of the Study Procedures:

If you agree to be in this study, you will be asked to do the following things: exercise at least 30 minutes per day, follow the dietary guidelines, get 8 hours of sleep each night, participate in gratitude exercises, and coaching.

Benefits of Being in the Study:

The benefits of participation will be far reaching in terms of lifestyle changes in diet and exercise that will rapidly re-establish positive health markers and change the trajectory of individual health trends, leading to a far greater quality of life.

Confidentiality:

The records of this study will be kept strictly confidential. Research records will be kept in a locked file, and all electronic information will be coded and secured using a password protected file. We will not include any information in any report we may publish that would make it possible to identify you.

Right to Refuse or Withdraw:

The decision to participate in this study is entirely up to you. You may refuse to take part in the study *at any time* without affecting your relationship with the participating researchers or Sixth Dimension. Your decision will not result in any loss of benefits to which you are otherwise entitled.

Right to Ask Questions and Report Concerns:

You have the right to ask questions about this research study and to have those questions answered by Dr. Baird before, during, or after the research. If you have any further questions about the study at any time feel free to contact us support@griffinhill.com. If you like, a summary of the results of the study will be sent to you.

Consent:

Your signature below indicates that you are healthy enough to participate in the study including exercise and the outlined change in diet. Furthermore, you assume responsibility for any risk or injury that may result during your participation in the study. Your signature also indicates that you have decided to volunteer as a research participant for this study and that you have read and understand the information provided above. You will be given a signed and

dated copy of this form to keep along with any other printed materials deemed necessary by the researchers.

Subject's Name
(print):

Subject's Signature:

Date:

Researcher

Date:

Signature:
