Additional file 2: Research Consent Form

Title: Thirst of information and Needs reflections of Type 2 Diabetes Patients with insulin treatment in North-East Ethiopia: A Qualitative Exploration

I confirm that I have read and understand the information sheet given for the study. I had the opportunity to consider the information, ask questions and got the answers satisfactorily. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, without my legal rights being affected. I understand that relevant data will be collected during the study, may be looked by responsible individuals from Wollo University. I give permission for the researchers to have access to the data to be collected. I give my consent for the audio-taping of interview as described in the information sheet. I give my consent for anonymous direct quotes to be used in reports and publications. I agree to take part in this study.

Interviewer	Name: _____ Signature:_____ Date:_____
Participant	Code:_____ Signature:_____ Date:_____