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PARTICIPANT CONSENT FORM

Version 2.4 27th July 2020
Local Lead Investigator: [local_lead_investigator_name]
Chief Investigator: Dr JK Baillie, University of Edinburgh

[affix_barcode]

- I have read the information sheet (v2.4 27th July 2020) for this study (or it has been read to me). I understand it and have had the opportunity to ask questions.
- I agree to providing a DNA sample and for this sample to be analysed to look for genetic factors important in critical illness.
- I can withdraw from the study at any time without giving any reason.
- There is a possibility that findings which are relevant to me will arise through this research. There is a process through which I can be informed of this.
- My DNA, and data derived from my DNA, including the whole sequence of my genome, may be stored and used for future research. Researchers may include national or international scientists, companies and NHS staff. To access the data, researchers must all be approved by an independent committee of experts, including clinicians, scientists and patients. There will be no access to the data by personal insurers or marketing companies.
- Different aspects of my health data will be collected by the GenOMICC investigators, the study sponsor (NHS Lothian and the University of Edinburgh), and partner organisations including Genomics England.
- I agree that the investigators of this study may contact me in the future to participate in future research studies, including clinical trials and studies unrelated to critical illness.
- I agree to life course follow-up including the collection and analysis of my health data for research will continue across my entire lifetime and beyond.

Please sign here to indicate that you agree with the statements above:

_____	_____
Print name of person taking consent	Print name of participant
_____	_____
Signature of person taking consent	Signature of participant
Date: _____	Date: _____

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If the participant cannot read the form:

I have no involvement in this research study and I attest that the information concerning this research was accurately explained to the participant in language they can understand, and that informed consent was given freely by the participant.

_____

Print name of witness

_____

Signature of witness

Date: _____

Original to be retained in site file. One copy to be given to participant.