

Consent form - 16 year olds

V3.0 21-12-21, IRAS ID: 297649

Once you have read each statement please write your initials in the box

Example:

I confirm that I have read and understood the information sheet for this study

1. I confirm that I have had the opportunity to consider my continued involvement in the study, to ask questions and have these answered satisfactorily
2. I understand that taking part is voluntary and that I am free to withdraw at any time without giving any reason, without my medical care or legal rights being affected.
3. I understand that relevant sections of my medical notes and data collected during the study, may be looked at by individuals from CPRD, from regulatory authorities or from the NHS Trust. I give permission for these individuals to have access to my records.
4. I understand that this trial will capture personal information from my medical records throughout the NHS for 13 months. This includes my GP records and hospital records, linked to central databases such as NHS Digital and the Office of National Statistics.
5. I give permission for the research team from CPRD, the University of Liverpool and Bangor University, and from regulatory authorities, where it is relevant to me taking part in this research, to access my records for the purposes of the trial.
6. I understand that the information collected about me will be used to support other research in the future, and may be shared anonymously with other researchers.
7. I agree to my General Practitioner being involved in the study, including any necessary exchange of information about me between my GP and the research team.
8. I understand that my data will be retained for a maximum of 15 years by the trial sponsor (Alder Hey Children's NHS Foundation Trust) and that these will be stored confidentially.
9. I give permission for a copy of this consent form, that will include my name, and my email address if given, to be sent to the Clinical Practice Research Data link team to allow confirmation that my consent was given.
10. I agree to be contacted by email to receive study specific information and study surveys.
11. I confirm that I am happy to continue in the study.

