**Arm A & B Consent form:**

**CAPTURE** - Cancer and COVID-19 antiviral response study

**A sub-study within TRACERx Renal** (**TRA**cking Renal Cell Carcinoma **E**volution Through Therapy (**Rx**)

*RMH Protocol No. 3723*

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| --- | --- |
| **Patient name:** |  |
| **Patient hospital number:** |  |
| **Trial ID:**  |  |

*Please* ***initial*** *boxes to agree*

1. I have read and understood the patient information sheet *ver 1.1 dated 29-APR-2020* for the above study and have had the opportunity to ask questions and discuss it with my doctor.
2. I agree to complete a questionnaire about my personal medical history, my current symptoms and my risk factors for the COVID-19 virus, such as travel history.
3. I agree to provide blood samples and throat swabs for use in the above research project.

1. I agree to excess tissue samples removed during any future procedures such as biopsies and/or surgeries to be used for research in the above project.
2. I agree for any stored samples such as blood, throat swabs and/or tissue from previous biopsies or surgeries to be used in the above research project.
3. I agree for analysis of DNA and other relevant material as part of the research project.
4. I agree that the samples and information collected about me will be stored, processed and analysed on behalf of the Royal Marsden NHS Foundation Trust.
5. I understand that my samples and data collected as part of this research project may be used for projects carried out by researchers at other institutions, including researchers working for commercial (including pharmaceutical) companies and results of the analysis of my tumour may be made available to other researchers in an anonymous format.
6. I understand that relevant sections of my medical notes and data collected during the study, may be looked at by individuals from The Royal Marsden NHS Foundation Trust, from regulatory authorities or from the NHS Trust, where it is relevant to my taking part in this research. I give permission for these individuals to have access to my records.
7. I understand that I am free to withdraw my consent for use of these samples at any time without giving a reason and without my medical care or legal rights being affected.
8. I understand that research using the samples I give may include research aimed at understanding COVID 19, but the results of these investigations are unlikely to have any implications for me personally.
9. I understand that I shall not benefit financially if future research leads to the development of new treatments or medical tests.
10. I understand that I will not receive personal feedback on the research results or the results of my own genetic tests.
11. I agree to my GP being informed about my participation in this trial.
12. I agree that the samples and information collected can be used for future research by researchers at other institutions or laboratories including researchers working for commercial companies.
13. I understand that my name and contact details will be stored in the PROFILES questionnaire system on servers owned and based at the Royal Marsden for the questionnaire administration.
14. I understand that my name and contact details stored within the system will only be accessible to members of the local research team that need to contact me for the study and the PROFILES system administrator based at the Royal Marsden with full access to the system should any technical issues arise.
15. I understand that information I record in the questionnaires, including symptoms, will not be reviewed regularly by my clinical team and I should contact my doctor in the usual way should any issues arise.
16. 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.
17. I understand that the information collected about me will be stored in the PROFILES system indefinitely, unless I choose to withdraw consent and request the data be deleted.

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Name of Patient Date Signature

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Name of Person taking consent Date Signature