Imperial College London

Research Governance and Integrity Team



IRAS Number: 262145 Patient Identification Number for this trial: CONSENT FORM					
Ch	nief Investigator: Mr Richard Gibbs				
	Please initial all	boxes			
1.	I confirm that I have read and understand the information sheet dated 18/01/2022 version 2 for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.				
2.	I understand that my participation 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 Imperial College London 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.				
4.	I agree to my GP being informed of my participation in the study.				
5.	I agree to take part in the above study.				
6.	I give / do not give (delete as applicable) consent for samples collected during this study to be used in future ethically approved studies. I give permission for my samples to be sent to other organisations, including these outside of the EEA (European Economic Area)				

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 I give/do not give (delete as applicable) consent to being contacted to potentially part in other research studies. 			g
part in other recount	an old discourse		
Name of Participant	– Date	Signature	
Name of Person taking consent.	 Date	 Signature	

Consent form date of issue: 18/01/2022

Consent form version number: 3 IRAS number: 262145