Insert Hospital Logo]		*************************************	UNIVERSITYOF
0 d N	O'C N ask	THE COLUMN ACT	UNIVERSITY ^{OF} BIRMINGHAM
Study Number	Site Number		

A trial to study the effectiveness of sMoking cessation in the sURgical pathway befoRe mAjor lung sugerY: Project MURRAY: Feasibility Study

Participant Consent Form: Version 2.0

Loonfirm that I have road a			
I confirm that I have read and understand the patient information sheet (VersionDate//) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.			
I understand that my participation is voluntary and that I am free to withdraw at anytime without giving any reason, without my medical care or legal rights being affected. I give permission for data collected up until the point that I withdraw to be used in the research analysis.			
study may be looked at by or from the NHS Trust, who	individuals from the reere it is relevant to my	esearch team, from regulatory authorities vaking part in this research. I give	
5. I agree for my GP to be informed of my participation in the study.			
Optional – please choose	option A) or B)		
A) I agree to take part in the interventional part of the study (including hospital based Intensive smoking cessation support).			
B) I do not wish to take part in the interventional part of the study but I do agree to take part in the observational part of the study (including standard smoking cessation support).			
University of Birmingham a recording and transcription	and University College at 4-8 weeks after su	ELondon, to be interviewed with audio rgery to discuss my treatment and	
I agree for my data to be u	sed for ethically appro	oved future research in lung surgery.	
me of Participant	Date	Signature	
	I understand that my partic without giving any reason, permission for data collecte analysis. I understand that relevant study may be looked at by or from the NHS Trust, who permission for these individual agree to be contacted eithersearch questionnaires at I agree for my GP to be informabled to be informabled to take part in the Intensive smoking cessation. B) I do not wish to take part in the observational part in the observational part in the observational participation in the study. I the reporting of the study. I agree for my data to be understand that my participation in the study. I agree for my data to be understand that my participation in the study.	I understand that my participation is voluntary ar without giving any reason, without my medical copermission for data collected up until the point the analysis. I understand that relevant sections of my medical study may be looked at by individuals from the roor from the NHS Trust, where it is relevant to my permission for these individuals to have access. I agree to be contacted either by telephone or poresearch questionnaires at 4-8 weeks after surger I agree for my GP to be informed of my participation. Optional – please choose option A) or B) A) I agree to take part in the interventional part of Intensive smoking cessation support). B) I do not wish to take part in the interventional part in the observational part of the study (include support). Optional - I agree for my name, address and corruniversity of Birmingham and University College recording and transcription at 4-8 weeks after suparticipation in the study. I give permission that in the reporting of the study. YES / NO I agree for my data to be used for ethically approximations.	I understand that my participation is voluntary and that I am free to withdraw at anytime without giving any reason, without my medical care or legal rights being affected. I give permission for data collected up until the point that I withdraw to be used in the research analysis. I understand that relevant sections of my medical notes and data collected during the study may be looked at by individuals from the research team, 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. I agree to be contacted either by telephone or post by a researcher to complete the research questionnaires at 4-8 weeks after surgery. I agree for my GP to be informed of my participation in the study. Optional – please choose option A) or B) A) I agree to take part in the interventional part of the study (including hospital based Intensive smoking cessation support). B) I do not wish to take part in the interventional part of the study but I do agree to take part in the observational part of the study (including standard smoking cessation support). Optional - I agree for my name, address and contact details to be shared with the University of Birmingham and University College London, to be interviewed with audio recording and transcription at 4-8 weeks after surgery to discuss my treatment and participation in the study. I give permission that my anonymous quotes may be used in the reporting of the study. YES / NO I agree for my data to be used for ethically approved future research in lung surgery.

Project MURRAY: Feasibility Study: Participant Consent Form V2.0 (13/09/19) IRAS ID: 246910

When completed: 1 for participant; 1 for researcher site file; 1 (original) to be kept in medical notes.

Date

Name of Person taking consent

Signature