Information document about

the re-use of medical (non-genetic) personal data for research purposes in unencoded form

(Art. 31 HRO)

Dear reader

- **Who we are:**
  We are (employees of the hospital, institute ...)

- **Why we are contacting you:**
  We are writing to invite you to help medical research.
  Data about your health is recorded as part of your medical treatment (e.g. blood pressure, results of lab tests conducted on your blood, X-rays, answers to questionnaires etc.).
  This data can be very important for research. We should therefore like to ask you to allow your doctor to pass this data on to us.

- **Your rights as a donor**
  You should only release your data for re-use in research if you wish to do so. Nobody may force you to do so in any way, or attempt to persuade you. If you do not wish to release your data, you do not have to explain why.
  If you decide to release material and data, you can change your mind at any time. You do not have to give reasons for doing so.
  We will be happy to give you all the results from a research project that relate to you and your health*. However, if you do not want to know the results you can instruct us not to tell you. Alternatively, you can ask for the results to be given to a person of your choice.

So we would like to ask you to decide beforehand:
- Do you want to know the results?
- Do you not want to know the results?
- Do you want us to give the results to a person of your choice? (for instance, relatives, friends, your GP, etc.).

*There are also results that are of no significance to individual patients or that do not allow any conclusions to be drawn with regard to health or treatment. In these cases we cannot give you any information.
• **Confidentiality**
We will treat your data in strictest confidence. It will be handled only by people working on the project who really need it for their work. In particular … (explanation of specific measures, storage location, access rules etc.)

• **Transmission of data**
If any such request is made, we will also pass on your data to third parties in encoded/unencoded form for research purposes.
Declaration of consent for the re-use of medical non-genetic data for research purposes in unencoded form (Art. 31 HRO)

Surname and first name of the patient or person concerned:          Date of birth:

I hereby consent to medical non-genetic data about me that has been obtained as a result of medical treatment or otherwise being re-used in unencoded form for research purposes.

I confirm that
• I have received the information document relating to this declaration of consent.
• I have been told that my consent is voluntary.

• I know that I can withdraw this consent at any time without giving reasons.
• I know how my data is protected.
• I have been informed that the data can be passed on to third parties for research purposes.

Place, date, legally valid signature of the patient or person concerned or his / her authorised representative.

Place, date, legally valid signature of the person giving the information.