

**INFORMED CONSENT FORM
FOR PARENT OR LEGAL GUARDIAN PARTICIPATION
AND PERMISSION FOR CHILD'S PARTICIPATION IN RESEARCH**

Sponsor / Study Title: RARE-X / "RARE-X Data Collection Program"

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Summary of Data Collection Program (DCP)

You are being asked for your consent to participate and permission for your child to take part in a research study (the DCP) because you stated that your child has or may have a rare disease. If you are the parent or legal guardian of a child who may take part in this study, your permission and the permission of your child, if they are age 7 or older, will be needed.

Taking part in the DCP is voluntary.

The purpose of the DCP is to collect and store information (called "data") about participants with many different types of rare diseases. The DCP will make this data available to researchers worldwide for their studies. The DCP will also help improve participants' connections with researchers and increase the number of participants taking part in research studies and clinical trials. These studies/trials could be for study drugs, study devices, or other study therapies. The total number of participants who will take part in this study will not have a cap.

Through your account on the RARE-X DCP website, you will be asked one or more sets of questions (called "surveys") about your child's health, health history, treatment and care, and the effect of your child's having a rare disease on your household. The DCP will store your child's data, along with other participants', in a secure server. By making choices through your account, you will be able to tell RARE-X who you want to share your child's data with. Your choices may include researchers, patient groups, life science commercial companies (biotech, pharma, drug manufacturers), and others.

The data you provide may help research efforts to one day offer better treatment and prevention options for rare diseases like your child's. However, your child may not directly benefit from participating in this program. Any statements in the website Terms of Use that appear to limit the participant's rights do not apply to their participation in this research program. (See potential benefits and risks sections below.)

There is a small risk that someone who is not authorized would see data that identifies you or your child. (See more information in the confidentiality section below.)

If you are interested in learning more about the DCP, please keep reading on the next page.

Introduction

RARE-X is a non-profit organization that has created the RARE-X Data Collection program ("DCP") to support families with people who have rare diseases in collecting and storing their data for research and future investigation. The DCP allows participants or their parents/legal guardian to choose how their data is seen, shared, and used for support and research.

You are being asked permission for your child to take part in the DCP because you stated that your child has or may have a rare disease.

The information below may help you decide if you want your child to take part in the DCP. This form explains what you and your child will have to do if you decide to take part. It also describes the risks and benefits of taking part. Any statements in the website Terms of Use that appear to limit the participant's rights do not apply to their participation in this research program.

If you have any questions or do not understand some of the information about taking part in the DCP, you should ask the principal investigator contact listed at the top of this permission by phone or email. It is important that you understand the DCP and your choices. You can talk about your child's participation in the DCP with anyone you choose to help you understand the information. Do not sign and date this form until your questions have been answered, and you decide that you want your child to be part of the DCP.

What is the purpose of the DCP?

The DCP is a program to collect and store data about participants with lots of different kinds of rare diseases for research and participant support. Another purpose of the DCP is to increase participant recruitment into research studies and clinical trials.

With your permission, your child's de-identified data in the DCP can be shared with researchers (including researchers at drug companies) and approved patient organizations worldwide.

Who is funding the DCP?

RARE-X, a non-profit organization, is paying for the DCP.

RARE-X does not make money (a profit) for its work on this program. RARE-X raises funds through grants, support contracts, and sponsorships.

How long will the DCP last?

The DCP does not have an end date. In fact, over time participants and caregivers may be asked to update their data to improve rare disease research.

You or your child can quit at any time. (See the section about quitting below.)

Who is eligible to take part in the DCP?

All participants and families who have or may have a rare disease(s) may take part in the DCP.

Participants and families who may take part include:

- Any person who has been diagnosed with a rare disease, or who is looking for a diagnosis.
- A parent or legal guardian of a child with a rare disease may register a child who is a minor (a "minor" is a child under the age of 18, in most states).
- The legally authorized representative of an adult with a rare disease who cannot physically or mentally answer the surveys may enroll the affected participant.

Do I or my child have to take part in the DCP?

Taking part in the DCP is voluntary. This program is for research purposes only. The only alternative is to not participate in this program.

At any time, you may choose not to participate or give permission for your child to take part or, you may choose for you/your child to not participate or you may withdraw yourself/your child from the program for any reason without penalty or loss of benefits to your child and it will not affect the participant's medical care.

What will I have to do if I take part and give permission for my child to take part in the DCP?

We will ask you to create a secure, password-protected account. You will have the chance to answer a set of questions (surveys) about your child's health, health history, treatment and care, and the impact of having a rare disease on your household.

Your child will not be asked to do anything for the DCP at this time.

It is likely that in the future, DCP will expand to include the collection of biosamples such as saliva or blood. At that time, RARE-X would request an additional consent and permission to take part in that process.

How will my child's data be used, and for how long?

Your child's data will be safely stored on a secure server and made available to researchers and trained patient organizations that you choose. There is no set time limit on how long the DCP will store your child's data for future research.

What kind of data can I choose to share?

There are two kinds of data that you can choose to share:

- Identifiable data may have your child's name, date of birth, or other personal data on it that a person could use to identify your child easily.
- De-identified data has had your child's name and other personal identifiers removed from their data and replaced with a code to keep your child's privacy.

Who can I choose to share my child's *identifiable* data with, and what will they do with it?

You may choose to share your child's *identifiable* data with qualified patient organizations associated with your child's disease.

A qualified patient organization will have training in research rules about privacy and security. They may contact you to offer community support. They will also be able to help you with completing your DCP surveys if you need help. RARE-X offers you to share your child's data this way because RARE-X understands the importance of patient community/organization support in rare disease.

Who can I choose to share my child's *de-identified* data with, and what will they do with it?

You can choose to share your child's *de-identified* data with researchers for their studies. These studies may happen in the future. The researcher will not have to ask you again if you want your child to take part in any specific study they do in the future. The researchers will be able to include your child's data in current and future studies related to your child's disease or to other people with similar issues or if you choose, other study participants. This process allows your child's data to be used frequently by many researchers.

This also means that researchers may do a study in the future using your child's data for a study that you or your child might disagree with.

With your permission, we will share your child's de-identified data with many different types of researchers. For example, researchers might be associated with universities, patient organizations, or drug companies.

Some of these studies may be about diseases *other* than the disease that affects your child. Sometimes researchers discover that unrelated diseases may have connections. Some of these researchers may study ways to collect data to better measure health issues and how health issues might change with treatment or care. For example, the researchers might study how to collect data in a standard way, so the data is easier to study. Some of these studies may be for for-profit purposes, such as developing new drugs.

When researchers request data for analysis, they are required to tell RARE-X what they will use the data for and agree only to use it for that reason.

How can I choose who to share my child's data with?

RARE-X knows that you may change your mind about the people and organizations that you want to share your child's data with over time. You can change your preferences at any time through the online Data Sharing Preference Survey in the RARE-X DCP.

You will have to choose **one** of the following two types of research:

1. General Research This is the broadest type of research. When you choose General Research researchers may use your child's data for:

a. Health/Medical/Biomedical Research

Researchers can access and use your child's data to learn more about a health condition, its causes, symptoms, progression, and treatments. This type of research could include research on any health condition, even if it is not a rare disease.

and

b. Other kinds of studies that are not related to health such as

- Research on age, race, and ethnicity
- Research studying traits such as how long people live or how easily they may get sick
- Research about genetic traits of different populations
- Studies to develop survey questions to improve research

or

2. Health/Medical/Biomedical Research This type of research is narrower than type 1, General Research.

If you choose just Health/Medical/Biomedical Research, your child's data may be used for fewer types of research studies than if you choose General Research.

If you choose just Health/Medical/Biomedical Research, your child's data may *only* be used to learn more about a health condition, its cause, symptoms, progression, and treatments.
(Research described in section 1.a above)

Your child's data will **not** be used for other kinds of studies not related to health described in section 1.b above.

Other Limits on Sharing for Research

You will also be able to choose to further **limit or restrict** how your child's data is used for research. You don't have to put any further limits on how your child's data is used, but if you would like to, you can choose restrictions such as:

- A. Not allowing your child's data to be used for commercial/for-profit research purposes
- B. Not allowing your child's data to be used for research studies unless an Institutional Review Board (IRB) has reviewed them.

An Institutional Review Board is a type of committee that reviews research studies and methods to help protect the rights and welfare of study participants. Most of the people who are on an IRB have professional expertise to be able to review the research. The IRB has scientists and nonscientists as part of the committee.

Whether you say yes or no to these choices, your child can still take part in this program.

Who else is my child's data shared with?

As part of this consent and permission you understand that RARE-X may need to see and use your child's data to help improve the quality of the DCP or as required by law.

For example, your child's data may be seen/used by:

- A limited number of RARE-X study staff and contractors who need the data to do their jobs; or
- When required, with federal regulatory or oversight authorities; or
- Our Institutional Review Board (IRB) so that they can make sure we are following the choices you made about sharing your child's data and the ways that we have said we would run this program; or
- Officials if otherwise required by law (such as if we find or suspect child abuse).

Will I be contacted if it looks like my child might be able to take part in a research study or clinical trial (study drugs, study devices, or other study treatments) based upon the data I provided?

It is your choice if you would like to be contacted by RARE-X or a patient organization if a researcher thinks your child might be a good fit for a research study and/or clinical trial. You will be given a choice at the end of this form to indicate whether or not you wish to be contacted.

If you say yes, a study staff member from RARE-X or a qualified patient organization will contact you to tell you about the study to see if you might be interested in your child's taking part in a study or trial and how to contact the researcher. You will NOT be contacted directly by the researcher. It will be up to you whether you want to contact the researcher to further discuss your child's possibly taking part in a research study and/or clinical trial.

Will my child benefit from taking part in the DCP?

Your child is not likely to directly benefit from participating in this program.

However, the data you share about your child may help research efforts to one day provide better treatment and prevention options for your child's rare disease.

Will we be paid for taking part in the DCP?

No. Neither you nor your child will be paid for taking part in the DCP.

Neither of you will be paid if new drugs, tests, devices, or commercial/for-profit products are created due to research on your data.

Will I find out the results of the research?

No. You will not receive individual results from research done using your child's data. However, the DCP will provide summary results about research and significant discoveries to all participants.

We will do this by regularly updating the DCP website that you used to learn about this program. Having access to this summary data may help you better understand your child's symptoms and care options.

Any new important information that is discovered during the program and which may influence your willingness to continue participation in the program will be provided to you.

How will data about my child be kept confidential?

RARE-X will remove your child's name and other personal identifiers and replace them with a special code number before sharing your child's data with others. RARE-X will encrypt (scramble) your child's data when stored, so it is hard for people without permission to read it.

Here are some other steps we take to keep your child's data confidential:

- Any researchers using your child's data must sign an agreement promising that they will not try to find out who you are.
- Only a few members of the RARE-X study staff who receive special training will have access to your child's identified data and only for authorized purposes.
- All RARE-X study staff and contractors with access to identifiable data must sign an agreement with RARE-X to keep data confidential. If you have questions or concerns,

ask the Principal Investigator, whose contact information is on the top of the page, for more information.

- We limit access to your child's data to only those organizations and people who are authorized to see it.

This research is covered by a Certificate of Confidentiality from the National Institutes of Health.

Certificates of Confidentiality protect the privacy of research participants by prohibiting the release (disclosure) of identifiable, sensitive information (data) to anyone not connected to the research except when the subject consents or in a few other specific situations.

What that means is that the researchers with this Certificate **may not disclose or use** information, documents, or biospecimens that may identify you/the participant in any civil, criminal, administrative, legislative, or other action, suit, or proceeding, or be used as evidence, for example, if there is a court subpoena (i.e. divorce proceedings or criminal investigations, etc), unless you have consented for this use.

Information, documents, or biospecimens protected by this Certificate cannot be disclosed to anyone else who is not connected with the research except, if any of the following:

1. there is a federal, state, or local law that requires disclosure, such as those laws that require reporting of child abuse or neglect, harm to self or others, and communicable diseases, for instance.
2. you have consented to the disclosure, including for the participant's medical treatment
3. it is used for other scientific research, as allowed by federal regulations protecting research participants.

The Certificate **cannot be used** to refuse a request for information from any governmental agency sponsoring/funding the project that is needed for auditing or program evaluation. Neither can the Certificate be used to refuse a request for information that must be disclosed in order to meet the requirements of the federal Food and Drug Administration (FDA).

You should understand that a Certificate of Confidentiality does not prevent you from voluntarily releasing information about yourself/the participant or your/the participant's involvement in this research. If you want your/the participant's research information released to an insurer, medical care provider, or any other person not connected with the research, you must provide consent to allow the researchers to release it.

The Certificate of Confidentiality will not be used to prevent disclosure for any purpose you have consented to in this informed consent document or agreed to as part of data collection (see "How can I choose who to share the participant's data with?" part of this consent form).

What are the risks of my child taking part in the DCP?

As with all online data collection, there is a small risk that someone who does not have permission could see the data that RARE-X has stored about your child.

An accidental release of your child's data could possibly identify your child or your family. We believe the chances that these things will happen is very small, but we cannot guarantee absolute confidentiality.

Because of the small number of people who have some rare diseases, there is a risk that a researcher familiar with your rare disease community and/or genetics could connect de-identified data back to your child. Although they may know the data is about your child, they are bound by their agreement with RARE-X not to contact you or publish data that identifies your child.

It is possible that someone who has access to your child's identifiable data could use or share it in a way that could make it harder for your child or your family to get or keep a job or insurance. There are laws against the misuse of genetic data, but they may not protect your child's data in all cases.

As part of this research, you may be required to use one or more of the following to collect research data: a phone or web app/ site, online/electronic questionnaires/surveys, or a device that tracks information about you.

While using these electronic tools, information about you may be collected and shared with the researchers or people outside of the study. This data might include personal health information, location, call logs, text message history, web browsing history, or social media use. A complete description of the data collection and data sharing for an app, online/electronic questionnaires/surveys, or device can commonly be found in the Terms of Use, End User License Agreement, or Privacy Policy. If you would like to read these documents, request a copy or instructions about how to access this information from the study staff. While the Terms of Use, End User License Agreement, or Privacy Policy may include statements limiting your rights if you are harmed as a result of your use of the app, online/electronic questionnaires/surveys, or device in this study, you do not release the investigator, sponsor, institution, or agents for responsibilities from mistakes. You also do not waive any of your rights as a research subject.

Some people feel uncomfortable when answering questions about the quality of their life. Though it is always better to have fully completed questionnaires, you do not need to answer any questions that make you feel uncomfortable.

There may be risks that are unknown.

Will it cost me anything for my child to take part in the DCP?

No. There are no costs for your child to take part in the RARE-X DCP.

Can I access my child's data from the DCP?

RARE-X will allow you to see and print the data you put in the DCP.

Can we quit the DCP??

Yes, you tell us that you no longer give permission for you/your child to participate in the DCP at any time for any reason.

If you or your child decide to quit the DCP, you will be offered some choices about whether RARE-X keeps or deletes your child's data.

To stop participating, you must do so by contacting the Principal Investigator listed on the top of this form.

If you or your child decide to quit, you can choose to:

- Allow the DCP to keep the data RARE-X has already collected about your child. RARE-X will continue to share it with researchers for future research studies; or
- Require the DCP to delete all your child's data, including the special code assigned to your child's data. However, if you choose to delete your child's data, we cannot take back any of your child's data that has already been shared with researchers or approved patient organizations. We will not be able to contact you for any reason in the future, including telling you that your child may be a good fit for possible studies or clinical trials.
 - You may ask RARE-X to transfer your child's data to another data collection platform before we delete it.
 - If you delete your child's data and choose to re-join the DCP in the future, you will have to start over again from the beginning.

The principal investigator or the sponsor can stop your/your child's participation at any time without your consent for the following reasons:

- If you fail to follow directions for participating in the study;
- If it is discovered that you do not meet the study requirements;
- If the study is canceled; or
- For administrative reasons.

Who would I contact about this program?

During the study, if you have questions, concerns or complaints about the study, please contact the principal investigator at the telephone number listed on the first page of this consent document.

An institutional review board (IRB) is an independent committee established to help protect the rights of research participants. If you have any questions about your/your child's rights as a research participant, and/or concerns or complaints regarding this research study, contact:

- By mail:
Study Subject Adviser
Advarra IRB
6100 Merriweather Dr., Suite 600
Columbia, MD 21044
- or call **toll free:** 877-992-4724
- or by **email:** adviser@advarra.com

Please reference the following number when contacting the Study Subject Adviser:
Pro00049000.

Advarra IRB reviewed this study. Advarra is a group of people who review research studies to protect research participants' rights and welfare. You can ask Advarra general questions about what it means to be in a research program. Review by Advarra does not mean that the DCP is without risks.

Permission Documentation

I understand and agree that:

- I am voluntarily providing my child's personal data to the RARE-X DCP as a place for me to put my child's data for use in research.
- I may choose to stop participating at any time. If I quit, my child's data may be deleted at my request. I also understand that any data that has already been shared with researchers and used in a specific study cannot be taken back. If I quit, it will have no impact on my child's medical care.
- The DCP may share my child's de-identified data for the types of research that I choose. These research studies may happen in the future.
- My child may not personally benefit from participating in the DCP or from the use of my child's de-identified data in any research study.
- I give permission to the RARE-X DCP's study staff to contact me to ask me to update my child's health status, or my contact information, to request that I upload a particular attachment, or to complete forms associated with my/my child's participation in the DCP.

Check the boxes below to indicate if you agree to the following options. *If you check "no" to any given option, you/your child can still take part in the DCP.*

YES **NO**

RARE-X may contact me with follow-up research surveys and invitations for my child to take part in additional studies. I may choose to ignore these surveys/invitations.

RARE-X or a qualified patient organization may contact me if a researcher thinks that my child may qualify to be part of a clinical trial/study.

My signature below indicates:

- I am the parent or legal guardian of the child whose name is listed below.
- I have read this consent and permission form. I understand the information in this form. I have had enough time to read the consent and permission form and think about agreeing to take part and give permission for my child to take part in the DCP.
- I have had the opportunity to ask questions related to the DCP and do not have any unanswered questions at this time.
- I agree to take part and give my permission for my child to take part in the DCP.
- I agree to allow the collection, use, and sharing of my child's data as described above.
- By signing and dating this form, I do not give up any of my or my child's legal rights.
- I understand I will get a signed and dated copy of this consent and permission form.

Printed Name of Child

Printed Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date of Signature

Indicate the legally authorized representative's authority to act for the participant:

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Spouse |
| <input type="checkbox"/> | Parent of adult participant (18 years if age or over) |
| <input type="checkbox"/> | Adult child (18 years of age or over) for his or her parent |
| <input type="checkbox"/> | Adult sibling (18 years of age or over) for his or her sibling |
| <input type="checkbox"/> | Grandparent |
| <input type="checkbox"/> | Adult grandchild (18 years of age or over) for his or her grandparent |
| <input type="checkbox"/> | Individual with power of attorney |
| <input type="checkbox"/> | Guardian appointed to make medical decisions for individuals who are incapacitated |