Subject information letter

Concerning the scientific research “Experienced quality of an orthopedic consultation prepared with digital anamnesis and prediction of the diagnosis and treatment”.

Introduction

Dear Mr/Mrs,

We kindly ask you to participate in a scientific study. Participation is voluntary. To participate, however, your written permission is required. This research is being carried out by St. Anna Hospital Geldrop. The Medical Ethics Review Committee of the Máxima Medical Centre has assessed that this research is not covered by the Human Medical Research Act (WMO). Before you decide whether you want to participate in this research, you will be given an explanation of what the research entails. Read this information and ask the researcher for an explanation if you have any questions. You can also talk about it with your partner, friends or family.

1. Research goals

The aim of this study is to determine whether the administration of digital anamnesis questionnaires and the provision of personalized information to patients improves the perceived quality of an outpatient consultation by patients. For this purpose we collect data from standard anamnesis questionnaires that you complete before your visit to the consultation and we collect data from additional questionnaires to measure the effects of the intervention on your medical knowledge and your perceived quality of the consultation. We are conducting this research to improve your experience with an outpatient consultation, and to enable possible follow-up research. The final results will be published as a scientific article.

2. What participation means

We ask all patients with knee complaints who have been referred by their general practitioner to install the "Patient Journey app" on their mobile phone. If you consent to this study, we will ask you to complete a number of questionnaires in the Patient Journey app before and after your consultation at the outpatient clinic. This concerns the standard anamnesis questionnaire that you would normally complete outside the examination before visiting the outpatient clinic. It asks questions about your personal characteristics (gender, age, weight, height) and your complaints. The orthopedic surgeon can usually prepare your consultation on the basis of this questionnaire. Within this study, your answers may also be used to make a prediction of the diagnosis based on your complaints and the possible treatment(s) that are involved. These predictions are then used to provide you with information about the predicted diagnosis and treatment. You are requested to read this information. In addition, the predictions are passed on to the orthopedic

surgeon with whom you have an appointment. Two questionnaires will be taken to investigate the effect of these interventions. The first questionnaire pertains to your medical knowledge and will be taken at three different times before your consultation takes place. The second questionnaire relates to your experience of the outpatient consultation and will be administered after you have visited the outpatient clinic. If you decide to participate in this study and consent to the collection and storage of the questionnaire data, we ask you to sign the consent form. You can return this to us with the enclosed return envelope.

3. Possible pros and cons

You do not directly benefit from participating in this study.

4. Use and storage of your data

Your data will be collected, stored and processed for this research. This concerns data such as your name, date of birth, complaints, medical knowledge, and your experience with the outpatient consultation. The collection, processing and storing of your data is necessary to answer the research questions in this study and to publish the results. Each subject is given a code that will replace your real name. This is called encryption. Your name will then no longer be used. All your data will remain confidential. Only the researchers know which code belongs to you. The research data cannot be traced back to you when published in a (scientific) journal. By signing the consent statement, you consent to the collection, storage and processing of the data collected within this study. The researcher will keep your data for 15 years. After that, the personal data will be destroyed. For further questions about the way in which your data and privacy are handled, we refer you to the website of the St. Anna hospital:

Link: https://www.st-anna.nl/over-st-anna-ziekenhuis/nieuws-agenda/overzicht-nieuws/omgaan-met-persoonsgegevens-en-privacy/

5. Compensation for participation

You will not be compensated for participating in this study.

6. Do you have questions?

If you have any questions, please contact the research team:

- Walter van der Weegen, Onderzoeker Sportorthopedie, St. Anna Ziekenhuis Geldrop
  kog@st-anna.nl, 040-2864280
- Tristan Warren, stagiair, St. Anna Ziekenhuis Geldrop
  T.Warren@st-anna.nl, 06-34829526

Thank you for your attention.

Consent form scientific research “Experienced quality of an orthopedic consultation prepared with digital history and prediction of diagnosis and treatment”

I am aware of the purpose of the study. I was able to ask additional questions. My questions have been answered to my satisfaction. I had enough time to decide whether to participate.

I know participation is voluntary. I agree to participate in the study.

Name _____

City and date _____

Signature _____