

Laboratory Tests (LAB)

- CON100 Has the subject changed their mind about the donation of specimens or the extent of their participation in SHOW?
- <1> YES (go to CONINS) **CONS200 FMT_YES_NO.**
 <2> NO (Skip to LABdate)
- CONINS Interviewer needs to clarify with the subject how their initial decisions have changed and have the SP complete the consent signature page again.
- (INTERVIEWER: PRESS ENTER TO CONTINUE)**
- CONS1a2 TERMS OF CONSENT (AS TAKEN FROM THE APPROVED CONSENT SIGNATURE PAGE)
- Date Consent Signed **CONS2_DATE DATE.**
 MONTH
 DAY
 YEAR
 Interviewer's name
 Interviewer's number
 VERSION NUMBER OF CONSENT **CONS2_VERSION MT_NUMERIC.**
[IF VERSION NUMBER IS LESS THAN 21, DISPLAY THE FOLLOWING WARNING:
"YOU HAVE ENTERED A VESRION NUMBER LOWER THAN 21"]
- CONS22 THE SP INITIALED THE FOLLOWING FOLLOW-UP OPTIONS – MARK YES OR NO FOR EACH ONE.
- <1> YES <2> NO
1. I **have read or am aware** of all the facts in the **consent brochure**. I have asked questions and all of my questions have been answered to my satisfaction. I have read the consent brochure describing how my information will be shared. I know that I can call the SHOW main office if I have any other questions.
CONS221_1 FMT_YES_NO.
2. I understand that I can **choose to participate** in the survey and I can choose to stop participating at any time. I know that I may **refuse to answer** any question.
CONS221_2 FMT_YES_NO.
3. I agree to do the **interview and physical measurements in my home**. I understand that these include tests of blood pressure, heart rate, height, weight, waist, hips and arms, and breathing capacity.
CONS221_3 FMT_YES_NO.
4. I agree to **complete the packet** of questions that will be left at my house and understand that I will mail this back to SHOW.
CONS221_4 FMT_YES_NO.
5. I agree to meet with SHOW staff for the **blood draw** and urine collection.
CONS221_5 FMT_YES_NO.
- 6a. I agree to allow a trained phlebotomist to **draw my blood**. I understand that some tests and results will be sent to me.
CONS221_6A FMT_YES_NO.

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6b. I agree to allow you to take a saliva sample for future DNA testing.

CONS221_6B FMT_YES_NO.

6c. I agree to allow you to take a blood spot for future unspecified research.

CONS221_6C FMT_YES_NO.

7. I understand and agree to having my blood stored for future unspecified research.

CONS221_7 FMT_YES_NO.

8. I agree to provide you with a **urine sample**. I understand and agree to have my urine stored for future unspecified research.

CONS221_8 FMT_YES_NO.

9. I allow you to use a portion of my blood or saliva for **DNA testing**. I understand that the sample will be used to look for genetic causes of disease. I understand that my genetic information will not be sold and will not be used for cloning or stem cell research and will not be reported to me. I agree to have this stored for future unspecified research.

CONS221_9 FMT_YES_NO.

10. I agree that SHOW may call, send me a letter, and/or email me **about future studies** related to SHOW.

CONS221_10 FMT_YES_NO.

11. I agree to have my **interview taped**. I understand that this is for quality assurance of the conduct of the study and that this tape will be destroyed and not kept as part of the database.

CONS221_11 FMT_YES_NO.