

Newcastle Brain Tissue Resource

Edwardson Building

Newcastle University NE4 5PL

0191 208 1231

Consent to donation of surplus neurosurgical tissue for research v1.1 18 Jan 2023

Please initial boxes

1. I confirm that I have read the information sheet dated 18 January 2024 (version 1.1) for the above study. I have had the opportunity to consider the information, ask questions and have these answered satisfactorily. had
2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my medical care or legal rights being affected.
3. I understand that relevant sections of my medical notes and data collected during the study, be looked at by individuals from Newcastle University, from regulatory authorities or from NHS Trust, where it is relevant to my taking part in this research. I give permission individuals to have access to my records. may the for these
4. I agree to donate tissue samples which are excess to surgery and diagnosis for research.
5. I understand that Newcastle Brain Tissue Resource will undertake custodianship of the donated tissue in full compliance with guidelines agreed by National Research Ethics Committee, Human Tissue Authority and Medical Research Council.
6. I give my permission for DNA to be tested for the purposes of research
7. I give permission for samples to be used by commercial partners (e.g. drug companies); whereby any profits generated will be re-invested in further research or patient care, knowing that there will be no personal benefit from this.
8. I give permission for samples to be used in experiments using rodents (rats or mice).
9. I give permission for samples to be sent to researchers outside the UK.
10. I give permission for cells to be grown in culture from donated samples.

Continued overleaf

[Type here]

Name of Participant

Date

Signature

Name of Person
obtaining consent

Date

Signature

REFERENCE ONLY