RESEARCH CONSENT/AUTHORIZATION FORM

TITLE OF STUDY: Geisinger MyCode® Community Health Initiative
PRINCIPAL INVESTIGATORS: DJ Carey, PhD, CL Martin, PhD, FACMG, DABMGG
QUESTIONS OR PROBLEMS: 1-855-636-0019 (toll free)
24-HOUR HOSPITAL SWITCHBOARD: 570-271-6211

Geisinger Clinic invites you to take part in a project called the MyCode® Community Health Initiative (MyCode for short). By signing up for MyCode you agree to allow Geisinger to save your blood and saliva samples and use them for research. You also agree to allow scientists doing research with your samples to use information in your health record.

The goal of this research is to learn more about human health and disease to find better ways to keep people healthy and to help them when they are sick.

Please read this whole document carefully before you decide whether or not to take part in this research. Please keep this document for your records.

THIS FORM WILL TELL YOU:
- Why we are doing this research
- The benefits and risks of being a part of this research
- How we will collect samples of your blood or saliva
- How we will use your samples for research
- How we will protect your privacy

WHY DOES GEISINGER WANT TO KEEP MY BLOOD AND SALIVA SAMPLES?
Information that is in your blood or saliva can provide clues about your health and diseases you have or might get. Geisinger doctors and scientists want to do research to find these clues and learn how to use them to improve health.

Some of these clues are found in your DNA (which is also known as deoxyribonucleic acid). DNA makes up your genes. Genes provide instructions for things like eye or hair color, height, and sometimes things that affect health. Everyone’s DNA is slightly different. By studying the DNA of many different people and comparing it to information in their health records we hope to find differences in DNA that help people stay healthy or in some cases get sick. Your blood also contains proteins and other chemicals that can provide clues about your health and we may also study those.

Many people are needed to provide samples to do this research. We have samples from tens of thousands of Geisinger patients, and plan to collect more. Our goal is to enroll up to 500,000 Geisinger patients in this project.

MyCode is a project of Geisinger Clinic. MyCode activities (such as collecting, storing, or testing samples) may be paid for by the following sources:
- Geisinger’s own funds;
- Government grants;
- Grants from non-profit agencies that support research; and/or
- Commercial partners (such as drug companies)
WHAT WILL HAPPEN WHEN I PARTICIPATE IN MYCODE?
When you agree to participate in MyCode, you give us permission to:

- Collect samples of your saliva or blood (not more than 2 tablespoons at a time) and store them in a biobank, which is a safe, secure place for storing the samples
- Use your samples for research studies that we approve; This might include studies that analyze your DNA (your genes)
- Use information from your Geisinger medical record for research studies that we approve; This information might include diseases you have, medicines you take, and results of medical tests you get
- Contact you in the future to get more information or tell you about other research studies
- Tell you about results we get from studying your samples that might help you

HOW WILL YOU COLLECT MY MYCODE SAMPLES?
There are several ways we might collect your samples;

- A phlebotomist will collect a blood sample when you are having blood drawn because your doctor ordered tests
- You can volunteer to provide MyCode blood samples when you aren’t already having blood drawn for tests your doctor has ordered
- You might be asked to provide a saliva (spit) sample using a kit we will provide

WILL GEISINGER SHARE MY SAMPLES AND MY INFORMATION?
Your samples and the information that we get from studying your samples or your medical record may be shared with other researchers. These researchers may work for:

- Geisinger;
- Universities or medical schools, or other research facilities;
- Government agencies like the National Institutes of Health (NIH);
- Public agencies, foundations or other groups that conduct or sponsor research; or
- Companies that do medical research, like drug companies

Researchers must get permission to use your samples and information from two Geisinger committees - the Geisinger Institutional Review Board and the MyCode Governing Board.

The Geisinger Institutional Review Board is responsible for reviewing research that involves people. They decide if the research is done in a way that:

- Limits the possible harm to the participants;
- Makes sure that the risks of participating are reasonable; and
- Protects your privacy

The MyCode Governing Board makes sure that research that uses your samples and information will:

- Be a good use of the samples and information in the MyCode biobank and
- Help us learn more about health and disease

HOW WILL YOU PROTECT MY PRIVACY?
In most cases, researchers do not need information that could identify you when they are doing research using your MyCode samples and data. Your samples and research data will
be given a special code or study identification (ID) number. These ID numbers will be used to label samples and data when they are used for research, instead of information like your name or birth date that could be used to identify you.

Information that links you to your ID number will be kept in a secure file that is protected by Geisinger. Only a few people on the MyCode team will have access to this file. All of these people have been trained to protect your information. Information that can identify you will be given to Geisinger researchers only when it is necessary for the research, and with the approval of the Geisinger Institutional Review Board and the MyCode Governing Board.

If a non-Geisinger researcher wants information that identifies you, then a member of the MyCode team will contact you to see if you want to learn more about the study the researcher is doing. If you agree to learn more about their study, then the MyCode team will give the researcher your contact information. Then the researcher will contact you to tell you more about their study. You have the right to decide whether or not:

- You want to learn more about their study
- You want to take part in their study

All researchers who use MyCode samples or information are required to protect your privacy.

We will **not** tell you every time your samples and/or information are used for research projects.

To help us protect your privacy, we have obtained a Certificate of Confidentiality (COC) from the National Institutes of Health. The COC gives us the legal right in certain situations **not** to share research information that may identify you. These situations include any federal, state, local civil, criminal, administrative, or legislative order or other legal proceedings. For example, if we receive a subpoena telling us to share your research information with the court or another individual, our COC gives us the right to **not** share that information. We will use the COC to resist any demands for information that can identify you, except when information is requested in order to:

- audit or evaluate federally funded projects or
- meet the requirements of the federal Food and Drug Administration (FDA).

A Certificate of Confidentiality does not stop you or your family members from sharing information about yourself or your participation in this research. If you give your written (signed) consent for an insurer, employer, or someone else to receive your research information, then we cannot use the COC to withhold that information.

Our Certificate of Confidentiality will **not** be used to prevent disclosure to state or local authorities in suspected cases of child abuse and neglect, or if you may hurt yourself or someone else.

**WHO ELSE HAS THE RIGHT TO ACCESS MY PROTECTED HEALTH INFORMATION?**

Protected health information (PHI) is information about your health or your medical care that was collected by a healthcare provider (like Geisinger) that can be used to identify you.

Federal and state laws are in place to protect your PHI. Geisinger has departments that are responsible for making sure researchers follow these and other laws. Staff members in these departments may look at your research records to make sure we are following these laws.
Your PHI may be shared if it is required by law. Regulatory organizations may inspect and/or copy your research records (including information in your medical record) for quality assurance. These organizations include the U.S. Food and Drug Administration and the U.S. Department of Health and Human Services. These organizations must follow federal laws to protect your privacy when we are required to share your information.

The chance that Geisinger will be required to share your PHI with these agencies is small. If your PHI is shared outside of Geisinger, then some federal privacy laws may not apply. Some of these laws only apply to hospitals, doctors’ offices, and other healthcare providers.

Geisinger will make every effort to protect your PHI, but we cannot absolutely guarantee that your information will be safe.

Some genetic information that is uncovered by studying your DNA is unique to you (like fingerprints). When your genetic information is shared, we will make every effort to protect it. Researchers will promise not to try to identify you using any information they are given. The chance of anyone identifying you is small.

ARE THERE BENEFITS TO BEING A PART OF THIS PROJECT?
The main benefit of being a part of MyCode is helping researchers learn more about human health and disease. This will lead to better ways to treat disease and keep people healthy.

There is a chance that researchers might find information that could be important to your health (and the health of your family members) when they study your MyCode samples. Based on what we know today, we will find information that will be useful for medical care in only about 2% (1 in 50) of MyCode participants. The chance of finding information important to your health will increase as we learn more about health and disease.

Geisinger has a team of experts who will decide what research results should be given to MyCode participants and how we should tell them. Examples of such research results are increased risk of developing serious diseases like heart disease or cancer or how a person might respond to a medicine.

We will only inform you when we find information that we believe can be helpful in your medical care. At this time we will not tell you about health problems for which there are no medical treatments (like Alzheimer’s disease or Huntington’s disease).

Geisinger is committed to helping you understand and use the information that we might return to you as a result of your participation in MyCode.

Research that uses your samples and information may not be finished quickly. There is a chance that you will not hear from any researchers. If you do not hear from anyone on the MyCode team:
- Your sample may not have been studied yet OR
- You may not have any of the gene changes that we are studying at this time
WHAT HAPPENS IF A RESEARCHER FINDS INFORMATION THAT COULD BE IMPORTANT FOR MY HEALTH CARE?
If we find information that we think you should know to help your medical care, then we will:

- Tell you about the research result and what it means for your health;
- Tell your healthcare provider;
- Put this information in your medical record; and
- Work with you to make sure that you understand what you should do about this information.
The Genetic Information Nondiscrimination Act does not protect against discrimination by companies that sell life, disability, or long-term care insurance. At this time, the chances we would be required to share your genetic information with companies like this are small.

**DOES BEING IN THE STUDY COST ME ANYTHING?**
There is no extra cost to you or to your insurance company for being a part of MyCode.

If you are one of the people who get information from MyCode about your health, then medical appointments or testing you choose to have done because of this information will be billed to you and/or your health insurance provider. For example, if we find that you have an increased chance of getting breast cancer, then your doctor may want you to have mammograms more often than most women. The cost of these mammograms may be covered by your health insurance policy or you may have to pay for them.

**WHAT ARE MY RIGHTS AS A PARTICIPANT?**
*Being a part of this project is your choice.* If you decide to participate now, but change your mind at any time later, then you can then withdraw from MyCode. Your decision will have no effect on the medical care you receive from Geisinger.

If you wish to stop and no longer participate in MyCode, please write or call us using the contact information below. If you choose to call, we will send you a form to sign and return to us to complete the withdrawal process.
Phone: 1-855-636-0019
Address: MyCode (MC 44-00)
100 North Academy Avenue
Danville, PA 17822-2630

If you choose to stop being a part of MyCode we will not collect any new samples or information from you. Your samples in the MyCode biobank will be destroyed. If your information has been shared with researchers, then these researchers may keep using the information they have for research.

You will not own any information, medical tests, medicines, or other products that are created from research that used samples and information from MyCode. You will not get any of these products for free or get any money or other payment from the sale of any such product(s).

For questions about your rights as a research participant, please contact the Geisinger Institutional Review Board at toll-free 844-542-3299 or 570-271-8663 and reference study #2006-0258.

**HOW LONG WILL THIS STUDY LAST?**
There is no planned end date for MyCode. Your samples and information will be kept until they are no longer useful for research, or the project ends.
GEISINGER MYCODE® COMMUNITY HEALTH INITIATIVE
SIGNATURE FOR VOLUNTARY CONSENT/AUTHORIZATION

A blood sample may be collected and used for MyCode research when I have a blood draw. If we find information that we determine to be important to your health care, we may share that information with you and your doctor and place it in your electronic medical record.

A member of the Geisinger MyCode team may contact me to ask if I want to participate in future MyCode approved studies and to collect additional information.

SIGNATURE
I agree to take part in this research project.

_______________________________________
Research Participant Name (Please Print)

_______________________________________
Research Participant Signature               Today’s Date (Date of Consent)

_______________________________________
Date of Birth