INFORMED CONSENT TRACKING FORM

ID NUMBER: [Redacted] FORM CODE: ICTX DATE: 6/16/2022 Version 1.0

ADMINISTRATIVE INFORMATION

0a. Date: [Redacted] 0b. Staff ID: [Redacted]
0c. Who provided consent? (select one) 0d. Time of consent or consent update:
   a. Participant a. Visit
   b. Proxy b. Other
   c. LAR c. sIRB

Instructions: This form should be updated during the participant's visit or during follow-up phone calls.

1. Allow ARIC staff to contact me twice per year to ask questions about my health and where I live (select one):
   □ 2 = Agree to twice per year
   □ 1 = Agree to once per year
   □ 0 = do NOT agree to AFU contact – withdraw AFU consent

2. Allow ARIC personnel to release my findings from exams and non-genetic tests to the physician, clinic or person that I designate:
   □ 1 = Agree
   □ 0 = do NOT agree

3. Allow ARIC and investigators they work with to study my samples (e.g., blood, cells, urine, saliva) in current and future research:
   □ 1 = Agree
   □ 0 = do NOT agree

4. Allow scientists not associated with ARIC to study my samples (e.g., blood, cells, urine, saliva) in current and future research:
   □ 1 = Agree
   □ 0 = do NOT agree

5. Allow ARIC and investigators they work with to use my blood and cells to obtain, store and study genetic material (DNA/RNA) for current and future research:
   □ 1 = Agree
   □ 0 = do NOT agree
6. Allow scientists and specialized laboratories not associated with ARIC to study my de-identified **genetic** data, information and samples:
   - ☐ 1 = Agree
   - ☐ 0 = do NOT agree

7. Allow **commercial or for-profit companies that are not part of ARIC** to use my **genetic** and non-**genetic** information and samples to develop new diagnostic tests and medical treatments that may benefit people:
   - ☐ 1 = Agree
   - ☐ 0 = do NOT agree

8. No Longer Used

9. No Longer Used

10. Allow ARIC personnel to access my medical records.
    - ☐ 1 = Agree
    - ☐ 0 = do NOT agree

11. Allow ARIC personnel to audio or video record me to aid with data analysis. The investigator will not share these recordings with anyone outside of the immediate study team.
    - ☐ 1 = Agree
    - ☐ 0 = do NOT agree