RAPTOR-C19 Study Team
Nuffield Department of Primary Care Health Sciences
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Chief Investigator: Professor Richard Hobbs.
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Study Code: *Site ID Code:* *Participant identification number:*

CONSENT FORM: RAPid Testing fOR Covid-19 (RAPTOR-C19)

Name of Researcher: *If you agree, please initial box*

1.	I have read and understand the study information and/or understand the study information as read to me (Version 1.0 dated 01/06/2020). I have had the opportunity to ask questions and have had these answered satisfactorily.		
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 agree to give samples for this research. I consider these samples a gift to the University of Oxford and I understand I will not gain any direct personal or financial benefit from them.		
4.	I agree that the research team will be informed about the laboratory COVID-19 test results.		
5.	I understand that relevant sections of my medical notes and data collected by the study team may be looked at by authorised individuals from The University of Oxford, NHS organisations, and research governance monitors. I permit these individuals to access my research records.		
6.	I agree that the information held and maintained by Public Health England and NHS Digital may be used to provide information about my health status.		
7.	I agree to take part in this study.		
	Additional and optional		
8.	I agree for my anonymised samples to be used in future research, here or abroad, which has ethics approval. I understand this research may involve commercial organisations.	Yes	No
9.	I agree to be contacted about ethically approved research studies for which I may be suitable. I understand that agreeing to be contacted does not oblige me to participate in any further studies.	Yes	No

_____ _____

Name of Participant *Date*

_____ _____

Name of Person taking Consent *Date*

Tick if completed verbally and documented by person taking consent ☐

**1 copy for participant; 1 copy for researcher site file; 1 copy to be kept in medical notes* (if participant is a patient).