

# THE IMPACT OF PATENTS ON TRANSLATIONAL RESEARCH – NON-INVASIVE PRENATAL DIAGNOSIS IN EUROPE AND THE US



## CONSENT FORM

### Details of Project

This project is a qualitative interview and social network analysis research study examining the ways in which patents impact translational research in non-invasive prenatal testing.

### Consent

<i>Please tick the appropriate boxes</i>	Yes	No
<b>Taking Part</b>		
I have read and understood the project information sheet.	<input type="checkbox"/>	<input type="checkbox"/>
I have been given the opportunity to ask questions about the project.	<input type="checkbox"/>	<input type="checkbox"/>
I agree to take part in the project. Taking part in the project will include being interviewed and the interview being recorded.	<input type="checkbox"/>	<input type="checkbox"/>
I understand that my taking part is voluntary; I can withdraw from the study at any time and I do not have to give any reasons for why I no longer want to take part.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Use of the information I provide for this project only</b>		
I understand my personal details such as phone number and address will not be revealed to people outside the project except as may be required by law.	<input type="checkbox"/>	<input type="checkbox"/>
I understand that my words may be quoted in publications, reports, web pages, and other research outputs. I will not be identified in such research outputs.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Use of the information I provide beyond this project</b>		
I agree for the data I provide to be archived at the UK Data Archive and/or the University of Exeter.	<input type="checkbox"/>	<input type="checkbox"/>
I understand that other genuine researchers will have access to this data only if they agree to preserve the confidentiality of the information as requested in this form.	<input type="checkbox"/>	<input type="checkbox"/>
I understand that other genuine researchers may use my words in publications, reports, web pages, and other research outputs, only if they agree to preserve the confidentiality of the information as requested in this form.	<input type="checkbox"/>	<input type="checkbox"/>

\_\_\_\_\_  
Name of participant [printed]

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Dr Naomi Hawkins

\_\_\_\_\_  
Researcher

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### **Contact Details**

For further information about the research or your interview data, please contact:

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If you have concerns/questions about the research you would like to discuss with someone else at the University, please contact:

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2 copies to be signed by both interviewee and researcher, one kept by each