

If someone has completed this form on your behalf, please ask him/her to complete the section below:

I have completed this form on behalf of the person named above at his/her own request. I confirm that the person named has agreed to take part in the SWIMS and UK MS Register Project.

Signature: _____ Date signed: _____

Full Name (block letters): _____

Relationship to participant: _____

To be completed by neurologist (or delegate)

Person taking consent _____

Signature _____

Date _____

Useful Information

Identifiable Information: Name, Gender, Postcode, Date of Birth, Hospital Number & NHS Number (see Participant Information Sheet p6)

Medical Notes such as: Doctors notes, nursing records, referral letters (see Participant Information Sheet p6)

Health Related Records such as: Clinical System, GP Systems, MRI, Biochemistry (see Participant Information Sheet p7)

Data Linkage: Joining health care related data together for research purposes (see Participant Information Sheet p7)

Anonymous Data: Your identifiable information is replaced by a code unique to you. The data will still include the following: your gender; week and year of birth; and an ordnance survey code for the area in which you live. Usually this is referred to as “**pseudonymous data**” because the dataset includes this information and your unique code. Without access to the key used to allocate your unique code, however, the data is considered to be anonymous. The key will not be accessible to anyone who analyses the data (see Participant Information Sheet p6)

--	--	--	--	--	--