The PFAS Health Study

Participant Consent Form

Complete and sign this form if you AGREE for your child to take part in the Cross-sectional Survey and Blood Serum Study components of the PFAS Health Study. You can say NO by not completing and not signing this form.

I, ___________________________________________________________ give my consent for my child, ___________________________________________________________ to take part in the Study.

I have had the aims of this research project, how it will be conducted and my child's role in it explained to me.

I understand the risks involved as described in the Participant Information Sheet.

I am participating in this project on condition that:

• The information I provide will be kept confidential and not be used or released in any way that can identify my child;
• The blood test results will be used for the purpose of the Study and the Australian National University (ANU) is not responsible for providing medical treatment/advice;
• I will have access to reports on the progress of the Study and to a copy of its final report, including paper copy if I request it; and
• I am free to withdraw my child from the study at any time by contacting the researchers in writing or by telephone.

I understand that:

• If I provide consent for further tests on my child's blood sample stored at ANU, the researchers will send me the blood test results reporting on my child's levels of uric acid, creatinine and blood fats (cholesterol and triglycerides) and inform me if these results are abnormal;
• The researchers will not give me a medical interpretation of my child's blood test results;
• It is my responsibility to seek further medical advice, if necessary. Any costs associated with obtaining or acting on this advice will be my responsibility;
• If I do not agree to the researchers sending me my child's blood test results, they will not do so and will not inform me if any of the results are abnormal. Some of these tests check kidney function and cholesterol. High cholesterol is a risk factor for heart disease; and
• The researcher's may invite my child to participate in further research into PFAS exposure.

1 Official Project Title: The Per- and Polyfluoroalkyl Substances (PFAS) Health Study: Cross-sectional Survey and Blood Serum Study

This is for you to keep
Please indicate here if you are or are not willing to have your child’s blood sample tested for uric acid, creatinine, and blood fats. You do not have to agree to this.

☐ I agree to have my child’s blood sample tested for uric acid, creatinine and blood fats OR

☐ I do not agree to have my child’s blood sample tested for uric acid, creatinine and blood fats

Please indicate here if you are or are not willing to have your child’s results sent to yourself and their doctor. You do not have to agree to this.

☐ I agree to have my child’s results sent to me and agree to have my results sent to their doctor—please provide details of their usual doctor in the space below OR

☐ I agree to have my child’s results sent to me and do not agree to have my results sent to their doctor—do not provide details of their doctor OR

☐ I do not agree to have my child’s results sent to me (even if they are abnormal) and do not agree to have my child’s results sent to their doctor—do not provide details of their doctor

Please indicate here if you are or are not willing to have your child’s stored blood used in future PFAS research. You do not have to agree to this use.

☐ I agree that my child’s blood can be stored at the ANU and used for future PFAS research OR

☐ I do not agree that my child’s blood can be stored at the ANU and used in future PFAS research

I have been given a copy of the participant information sheet and consent form to keep.

Signature of Principal Investigator

Professor Martyn Kirk

Concerns or complaints to:

The ethical aspects of this research have been approved by the Australian National University Human Research Ethics Committee, and the Northern Territory Department of Health and Menzies School of Health Research Human Research Ethics Committee, (ANU HREC protocol 2018/651, NTDoH and MSHR protocol 2018-3226). If you have concerns regarding the way this research was conducted please do not hesitate to contact the researchers or the following:

**Human Research Ethics Officer**
The Australian National University

T: (02) 6125 3427
E: Human.Ethics.Offer@anu.edu.au

**Ethics Administration**
Human Research Ethics Committee of the NT Department of Health and Menzies School of Health Research

T: (08) 8946 8600
E: Ethics@menzies.edu.au

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