



Participant ID :

Participant contact information :

Agreeing to Take Part

1. I have read (or heard) the information sheet (Version XX dated XXX). I understand and have been able to ask questions. I have had enough time to think about whether I want to be part of the study.
2. I understand what is involved in the PAPAGAIO- Delivery project and I agree to take part. I know that I can change my mind or stop being part of either project at any time up to FINAL WITHDRAWAL DATE, without needing to explain why and my medical care will not be affected.
3. I understand that I will not be paid for taking part.

Initials

Being Involved

4. I understand that I will be randomly allocated to either have a **placental growth factor (PIGF) test**, then **PLANNED EARLY DELIVERY if the PIGF test confirms pre-eclampsia**, or the **USUAL CARE GROUP**.
5. I agree to giving a blood sample for a PIGF test (approx. 5ml or one teaspoon of blood)
6. I give permission for members of the research team to look at my medical records and my baby's.
7. I agree that the research team can contact me about this study again in the future.
8. I understand that my information might be reviewed by members of the research team, KCL or affiliated universities for monitoring purposes.

My Personal Information

9. I agree that personal information will be collected, stored and used to follow my progress through the study and enable follow-up. I understand that all information will be kept secret according to the data protection laws in the UK (Data Protection Act 2018 and UK General Data Protection Regulations (UK GDPR) and in my country.

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10. I agree that anonymous data about me & my baby will be stored safely on database by a company called OMDA.

After The Study

11. I agree that my results and anonymous medical data can be used in future ethically approved studies of pregnancy problems. I give permission for my anonymous information to be shared with other researchers.

12. I agree for the research team to keep my contact details and to contact me about future pregnancy studies.

13. I understand that confidentiality and anonymity will be maintained, and it will not be possible to identify me in any research outputs

Signatures

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Participant Name

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Signature

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Date

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Research Team Member Name

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Signature

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Date

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Name of interpreter if applicable

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Signature

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Date