



CONTRACT

CONSENT IN A TRIAL & CARE ENVIRONMENT

D2.1 – Finalised questionnaire ready for distribution

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ABSTRACT:

The present deliverable is a report on the finalised questionnaire ready for distribution. This questionnaire will be made available via the CONTRACT website to different types of stakeholders. The intention is to analyse the current situation concerning the legal, ethical, technical and clinical handling of consent in European projects dealing with vulnerable patient groups. The results of the questionnaire will serve as the necessary input for WP3 (Evaluation of the status in Europe).

KEYWORD LIST: Questionnaire, Stakeholders, consent

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List of Contributors

- Manolis Tsiknakis, TEI Crete
- Nikolaus Forgo, Leibniz University Hannover
- Magdalena Góralczyk, Leibniz University Hannover
- Nina McGuinness, Leibniz University Hannover
- Norbert Graf, University of Saarland
- Griet Verhenneman, University of Leuven
- Brecht Claerhout, Custodix NV

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Executive Summary

Work Package 2 (Problem Analysis) of CONTRACT will analyse the current situation concerning the legal, ethical, technical and clinical handling of the issues of consent in European projects dealing with vulnerable patient groups. The proposed methodology is a project-based questionnaire to identify existing practices and problems encountered in translational research throughout Europe.

The present deliverable is a report on the finalised questionnaire to be distributed to identified stakeholders. This questionnaire will be made available via the CONTRACT website to different types of stakeholders. The main stakeholders that were identified are:

- Clinicians / Care providers
- Chairpersons of research projects / trials
- Basic Researcher / Molecular biologists
- Computer Scientists
- Legal Experts
- Ethicists
- Data Manager / Statisticians
- European Policymakers

Patients or Patient groups are not the target of this questionnaire. They will be addressed in other EU-projects like ENCCA, the Network of Excellence for Paediatric Oncology.

The questionnaire will be available in English and is structured in a way that there are common questions for all stakeholders and stakeholder specific questions.

In parallel to the development of the questionnaire, the final identification of the target projects to be surveyed and relevant stakeholders within these projects was carried out.

The results of the questionnaire will serve as the necessary input for WP3 (Evaluation of the status in Europe).

1 Introduction

1.1 Purpose, context and scope of this deliverable

The present document is the narrative description of the finalised questionnaire prior to distribution. The questionnaire will be made available online via the website of the CONTRACT project. The main stakeholders will be identified and informed about the project in advance and asked to participate in the survey.

1.2 Background

CONTRACT focuses on informed consent as a fundamental precondition for the legal processing of personal data. Data flow between care and research or between different clinical disciplines and research groups is fundamental for translational research. As the data to be exchanged are in most cases personal data, data protection is of utmost importance. Regulations on data protection require that the data are only collected for specified, explicit and legitimate purposes and not further processed in any other way. Obtaining informed consent to the processing of data from patients is part of a data protection framework. Physicians are aware that they need to ask for prior consent when treating a patient and when asking a patient to participate in a trial.

One problem in obtaining consent is the heterogeneity of requirements depending on what the patient is being asked to consent to. "They differ in scope, necessity and in the conditions they need to comply with in order to be valid. They differ in their legal basis, in their doctrine and in the consequences a breach of consent might have. Those differences cause a tremendous legal and ethical complexity which becomes even more prevalent when the patient belongs to a vulnerable group. This complexity produces uncertainty and doubt among researchers and clinicians. Due to this complexity, IT-systems set up for care and for trials are frequently seen as different worlds. They lack the interfaces needed to make the data transferable. Doubt and complexity in relation to the legal, ethical and technical side of a framework for a trial can cause the end of translational research before it has even begun and this effect has a dramatic impact on patient groups already disadvantaged by their specific vulnerability."¹

Another problem of consent is the number of different consent forms and the increasing load of information provided by these forms. This poses the question of whether patients become 'overloaded' with information when giving consent. "Informed consent is not designed to protect the legal interests of the research team – rather to protect participants by providing essential information about the trial and informing them about their rights as participants. But investigators should realise that the written document alone may not ensure that participants fully understand the consequences of trial participation."²

The aim of the survey is to show how ongoing and upcoming European and national translational projects deal differently with consent issues. This will be the basis for delivering

¹ CONTRACT – Annex I – Description of work. Page 5

² Karlberg J-PE, Speers MA: Reviewing Clinical Trials: A Guide for the Ethics Committee. Hong Kong, PR China, 2010, page 71. ISBN 978-988-19041-1-9

concrete policy recommendations as to how the European Union could jointly protect patient's rights and support translational research by a better structured approach towards consent issues.

2 Target Projects and Stakeholders

2.1 Introduction

The CONSENT project has chosen to focus on projects and stakeholders dealing with consent issues in clinical trials involving vulnerable patient groups in particular.

We have identified the following main stakeholder groups for the survey:

- Clinicians / Care providers
- Chairpersons of research projects / trials
- Basic Researcher / Molecular biologists
- Computer Scientists
- Legal Experts
- Ethicists
- Data Manager / Statisticians
- European Policymakers

The difficulty for the CONTRACT project is the fact that the number of potential stakeholders is vast and it would not be possible to cover this scope within the project lifetime. Patients or patient groups are not the target of this questionnaire. Due to limited resources, it is not possible to provide the questionnaire in different languages, which is a prerequisite for surveys addressing patients or patient groups. These groups will be addressed in other EU projects such as ENCCA, the Network of Excellence for Paediatric Oncology, where patients are the main focus in their analysis of the same task. Close cooperation with ENCCA in this topic will add additional value to the work undertaken by CONTRACT.

2.2 Targeted projects

We have identified 221 projects to be actively contacted and asked to participate in the survey. The selection criteria were projects with a clinical research dimension and ideally with a clear link to vulnerable patient groups and/or consent issues. A search based on these criteria was done via the Cordis webpage using the “projects search” tool. Additional projects were added via connections through CONTRACT consortium members. The majority of the projects selected are European projects (184; 83%).

Table 1. European projects

Project Name	Institution	Contact Person	Function	Phone Number	email
Mitotarget - Mitochondrial dysfunction in neurodegenerative diseases: towards new therapeutics		Valérie Cuvier	Clinical Study Manager	+33 4 91 82 82 82	vcuvier@trophos.com
CHILD-INNOVAC - Nasal vaccination against respiratory infections in	INSTITUT NATIONAL DE LA SANTE ET DE LA RECHERCHE	Christine MAZINGUE (Ms.)			

young children	MEDICALE (INSERM)				
DEVANI - Design of a vaccine to immunize neonates against GBS infections through a durable maternal immune response	NOVARTIS VACCINES AND DIAGNOSTICS S.R.L.	Francesco GULLI (Dr)			
IBDASE - Mucosal protease and their inhibitors in inflammatory bowel disease: From etiopathogenetic insight to innovative therapy	UNIVERSITAET BERN	Daniel LOTTAZ (Dr)			
CAREPNEUMO - Combating antibiotic resistant pneumococci by novel strategies based on in vivo and in vitro host pathogen interactions	HELMHOLTZ- ZENTRUM FUER INFEKTIONSFOR- SCHUNG GMBH Braunschweig	Michael STRÄTZ (Dr.)			
EPOC - European paediatric oncology off-patent medicines consortium	UNIVERSITY OF NEWCASTLE UPON TYNE	Nicola PLACE (Ms)			
DIABIMMUNE - Pathogenesis of type 1 Diabetes - testing the hygiene hypothesis	Helsingin Yliopisto	Katariina VAINIO-MATTILA (Ms.)		+358 9 191 25043	
SOS - Safety of non-steroidal anti-inflammatory drugs	ERASMUS UNIVERSITAIR MEDISCH CENTRUM ROTTERDAM	Sander WOERDEMAN (Mr.)		+31 10 7043049	
GIPIO - Gastro-intestinal peptides in obesity	UNIVERSITAET LEIPZIG	Frank NOLDEN (Dr)		+49 34197 30100 0	
EUROTRAPS - Natural course, pathophysiology, models for early diagnosis, prevention and innovative treatment of TNF Receptor Associated Periodic Syndrome TRAPS with application for all hereditary recurrent fevers	CENTRE HOSPITALIER UNIVERSITAIRE DE MONTPELLIER	Valérie THORIN (Ms)		+33 467339643	
EURADRENAL - Pathophysiology and natural course of autoimmune adrenal failure in Europe	UNIVERSITETET I BERGEN	Inger GJESDAHL (Ms.)		+47- 55584998	
CUREHLH - European initiative to improve knowledge, treatment and survival of haemophagocytic syndromes in children	UNIVERSITÄTSK LINIKUM HAMBURG- EPPENDORF	Kai LEHMBERG (Dr)		+49- 4074105420 9	
SAGHE - Safety and appropriateness of Growth hormone treatments in Europe	ASSISTANCE PUBLIQUE - HOPITAUX DE PARIS	Christophe MISSE (Mr)		+33- 144841770	

EUNEFRON – European network for the study of orphan nephropathies	UNIVERSITE CATHOLIQUE DE LOUVAIN	Olivier DEVUYS T (Professor)		+32-2-7645453	
PEDDOSE.NET – Dosimetry and Health Effects of Diagnostic Applications of Radiopharmaceuticals with particular emphasis on the use in children and adolescents	EIBIR GEMEINNUETZIG E GMBH ZUR FOERDERUNG DER ERFORSCHUNG DER BIOMEDIZINISCH EN BILDGEBUNG	Monika HIERAT H (Ms.)		+43-15334064-20	
NIMBL – Nuclease Immune Mediated Brain and Lupus-like conditions (NIMBL): natural history, pathophysiology, diagnostic and therapeutic modalities with application to other disorders of autoimmunity	THE UNIVERSITY OF MANCHESTER	Liz FAY (Ms.)		+44-1612757114	
EURO-PADNET – The pathophysiology and natural course of patients with Primary Antibody Deficiencies (PA	UNIVERSITY COLLEGE LONDON	Greta BORG-CARBOTT (Ms.)		+44-2031083033	
03K – Oral off-patent oncology drugs for kids	INSTITUT GUSTAVE ROUSSY	Arnaud FORES T (Mr)		+33-142116604	
CHERISH - Improving diagnoses of mental retardation in children in Central Eastern Europe and Central Asia through genetic characterisation and bioinformatics/-statistics	ALMA MATER STUDIORUM-UNIVERSITA DI BOLOGNA	Verdiana BANDI NI (Ms.)		+39-0512099764	
PERS – Paediatric European Risperidone Studies	STICHTING KATHOLIEKE UNIVERSITEIT	Maarten VAN LANGEN (Mr)		+31-24-3619791	
NEOMERO – European 10ulticentre network to evaluate pharmacokinetics, safety and efficacy of Meropenem in neonatal sepsis and meningitis	FONDAZIONE PENTA-FOR THE TREATMENT AND CARE OF CHILDREN WITH HIV-ONLUS	Silvia FAGGION (Dr)		+39-049-8213585	
TREATRUSH – Fighting blindness of Usher syndrome: diagnosis, pathogenesis and retinal treatment (TreatRetUsher)	UNIVERSITE PIERRE ET MARIE CURIE – PARIS 6	Christine PETIT (Professor)		+33-145688890	
PENTA LABNET Paediatric European network treatment AIDS laboratory network	FONDAZIONE PENTA-FOR THE TREATMENT AND CARE OF CHILDREN WITH HIV-ONLUS	Silvia FAGGION (Dr)		+39-049-8213585	
PLASTICISE - Promotion of plasticity as a treatment for	THE CHANCELLOR,	Edna MURPHY		+44-1223-	

neurodegenerative conditions	MASTERS AND SCHOLARS OF THE UNIVERSITY OF CAMBRIDGE	(Ms.)		333543	
CHEARTED - Gene-environment interactions in heart development	ACADEMISCH MEDISCH CENTRUM BIJ DE UNIVERSITEIT VAN AMSTERDAM	:Ruth VAN DER GAAG (Dr)		+31-20-5664647	
LIFEVALVE - Living autologous heart valves for minimally invasive implantable procedures	UNIVERSITAET ZUERICH	Simon Philipp HOERST RUP (Professor)		+41-44-2553801	
REBORNE - Regenerating bone defects using new biomedical engineering approaches	INSTITUT NATIONAL DE LA SANTE ET DE LA RECHERCHE MEDICALE (INSERM)	Marianne DESM EDT (Ms.)		+33-240350669	
ALPHA-MAN - Clinical development of Enzyme Replacement Therapy in alpha-Mannosidosis patients using recombinant human enzyme.	CHRISTIAN-ALBRECHTS-UNIVERSITAET ZU KIEL	Paul SAFTIG (Professor)		+49-4318802216	
PREDICTA - Post-infectious immune reprogramming and its association with persistence and chronicity of respiratory allergic diseases	NATIONAL AND KAPODISTRIAN UNIVERSITY OF ATHENS	Efstathia KAFEN TZI (Ms.)		+30-2103689194	
PHARMACHILD - Long-term PHARMacovigilance for Adverse effects in Childhood arthritis focussing on Immune modulatory drugs	UNIVERSITAIR MEDISCH CENTRUM UTRECHT	Efdokia CHATZ OUDI (Ms.)		+31-887554579	
TINN2 - Treat Infections in NeoNates 2 - Evaluation of an infective agent (azithromycin) for the treatment of infections in preterm and term neonates	INSTITUT NATIONAL DE LA SANTE ET DE LA RECHERCHE MEDICALE (INSERM)	Isabelle PIRES (Ms.)		+33-143622716	
LOULLA&PHILLA - Development of 6-mercaptopurine and Methotrexate oral liquid formulations for the maintenance treatment of Acute Lymphoblastic Leukemia in children	ONLY FOR CHILDREN PHARMACEUTICALS	Vincent GREK (Dr.)		+33-6-62889643	
ADDUCE - Attention Deficit Hyperactivity Disorder Drugs Use Chronic Effects	THE SCHOOL OF PHARMACY, UNIVERSITY OF LONDON	Ian Chi Kei WONG (Professor)		+44-2078741544	
PSYCHCNVS - Copy number variations conferring risk of psychiatric	ISLENSK ERFDAGREINING EHF	Bjorgvin RICHA RDSSON (Mr)		+354-5701821	

disorders in children					
p-medicine	University of the Saarland	Norbert Graf (Prof.)		+49 6841 1628397	

Table 2. Further European projects

Project Name	Institution	Contact Person	Function	Phone Number	email
HIV Indicator Diseases Survey Across Europe - UK Arm	Chelsea and Westminster NHS Foundation Trust	Ann K Sullivan, MBBS FRCP		+44 (0)208 746 8000 ext 56199	ann.sullivan@chelwest.nhs.uk
		Michael Rayment, MBBS MA MRCP		+44 (0)208 746 8000 ext 56529	michaelrayment@nhs.net
6xFU/Epirubicin/Cyclophosphamide (FEC) Compared to 3xFEC-3xDocetaxel in High-risk Node-negative Breast Cancer Patients (NNBC3-Europe)	Martin-Luther-Universität Halle-Wittenberg	Christoph Thomssen, MD			christoph.thomsse@medizin.uni-halle.de
Malnutrition and Outcome in Hospitalized Children in Europe	Ludwig-Maximilians - University of Munich	Christina B Hecht, PhD candidate		0114989160 7904	christina.hecht@med.uni-muenchen.de
		Astrid AM Rauh, MD, MPH		0114989516 07934	astrid.rau-pfeiffer@med.uni-muenchen.de
Association of Multiple Cardiovascular Risk Factors and Erectile Function Across Europe (AMORE-Eur)	University Hospital, Saarland	Michael Böhm, MD		0049-6841-16- ext 23000	michael.boehm@uniklinikum-saarland.de
		Magnus Baumhäkel, MD		0049-6841-16- ext 23000	magnus@baumhaekel.de
Saving and Empowering Young Lives in Europe (SEYLE)	Rabin Medical Center	Alan Stanley Apter, MD		9723925323 2	eapter@clalit.org.il
		Keren non Tochtermann, BA		9723925345 2	kerento@clalit.org.il
Persistent Lyme Empiric Antibiotic Study Europe (PLEASE)	Radboud University	Anneleen Berende, M.D.		+31 24-3618819	AIG-secretariaat@AIG.umcn.nl
PREVAIL EU: Transfemoral Placement of Aortic Balloon Expandable Transcatheter Valves Trial (Europe)	Edwards Lifesciences	Jodi Akin		949 250 2730	jodi_akin@edwards.com
Utilisation of Angiox® in European Practice (EURO-vision)	The Medicines Company	Diana Schuette, PhD		+44 (0)1235 448500	Diana.Schuette@hemedco.com

The TRAFermin in Neuropathic Diabetic Foot Ulcer Study - Northern Europe The TRANS-North Study	Olympus France SAS	Corentin Le Camus, PhD		33 1 45 60 35 32	corentin.lecamus@olympus.fr
		Bruyère Mahuzier, PharmD		33 1 45 60 34 98	bruyere.mahuzier@olympus.fr
Combination Chemotherapy With or Without Filgrastim Before Surgery, High-Dose Chemotherapy, and Radiation Therapy Followed by Isotretinoin With or Without Monoclonal Antibody in Treating Patients With Neuroblastoma	University Hospitals, Leicester	Ruth Ladenstein, MD, Protocol chair		43-1-404-700	
A Migration and Bone Density Study Comparing 2 Types of Bone Cement in the OptiPac Bone Cement Mixing System	University of Aarhus	Kjeld Soballe, MD, Prof.			kjeld@soballe.com
Hull Early Walking Aids for Transtibial Amputees - Randomised Control Trial (HEART)		Ian C Chetter, MB ChB, FRCS		+44 1482 674212	ian.chetter@hey.nhs.uk
Europe-Africa Research Network for Evaluation of Second-line Therapy (EARNEST)	Medical Research Council	Justine Boles		+44 (0)207 670 4918	jvb@ctu.mrc.ac.uk
		Nicholas Paton		+44 (0) 207 670 4808	nip@ctu.mrc.ac.uk
The Effect of Teenage Maternity on Obstetrical and Perinatal Outcomes	University of Luebeck	Daniel A Beyer, M.D.		+ 49 451 500*2141	daniel.beyer@uk-sh.de
Genetics of Women With Lobular Carcinoma in Situ of the Breast	National Cancer Research Network	Elinor Sawyer, MD			elinor.sawyer@caner.org.uk
International Transtar Registry	Ethicon Endo-Surgery (Europe) GmbH	Goran Ribaric, MD, MSc			gribaric@its.inj.com
		Birgit Temiz, CRA			btemiz@its.inj.com
Adherence to PTH(1-84) Treatment (FP-002-IM)	Nycomed			+45 4677 1111	clinicaltrials@nycomed.com
Treatment of Predominant Central Sleep Apnoea by Adaptive Servo Ventilation in Patients With Heart Failure (Serve-HF)	ResMed	Andrea Ballentin, MD		+49 89 54 88 44 255	serve-hf@ikkf.de
		Simone Knabl		+49 89 54 88 44 274	serve-hf@ikkf.de
Multi-Centre European	NHS Tayside	James		+44 (0) 1382	j.ferguson@dunde

Photopatch Test Study		Ferguson, FRCP		632240	e.ac.uk
		Alastair C Kerr, MRCP		+44 (0) 1382 632240	alikerr01@yahoo.co.uk
European Surgical Outcomes Study (EuSOS)	Queen Mary University of London	Ahsun Khan, MBBS FRCA MD		+44 207 377 7299	ahsun.khan@bartsandthelondon.nhs.uk
		Amanda Vivian-Smith, RGN		+44 207 377 7299	amanda.smith@bartsandthelondon.nhs.uk
Comparison of Laparoscopic Colectomy Versus Open Colectomy for Colorectal Cancer: ... A Prospective Randomized Trial	National Taiwan University Hospital	Jin-Tung Liang, M.D., Ph.D.		886-2- 23562068	jintung@ha.mc.ntu.edu.tw
A Phase II, Open Label Trial of a Vaccine (FSME-IMMUN 0.5 mL Baxter) Against Tick-borne Encephalitis (TBE) for NIAID Workers Manipulating Tick Borne Encephalitis Virus (TBEV)	National Institute of Allergy and Infectious Diseases (NIAID)	Patient Recruitment and Public Liaison Office		(800) 411- 1222	prpl@mail.cc.nih.gov
Safety and Efficacy Study of Kaname Coronary Stent System for the Treatment of Patients With Coronary Artery Disease (KARE)	Terumo Europe N.V.	Dragica Paunovic, MD		+321638140 5	dragica.paunovic@terumo-europe.com
		Danny Detiege, RN		+321638138 0	danny.detiege@terumo-europe.com
Study of CH5132799 Administered Orally in Patients With Advanced Solid Tumors	Chugai Pharma Europe Ltd.	Chugai Pharma Europe		+44 208 987 5600	web_info@chugai-pharm.co.uk
A Study to Investigate the Benefits of the Early Detection and Intensive Treatment of Type 2 Diabetes	University Hospitals, Leicester	Melanie J Davies, MD		+44 0116 2586798	melanie.davies@uhl-tr.nhs.uk
		Emma L Healey, PhD		+44 0116 2586798	emma.healey@uhl-tr.nhs.uk
Swedish Adjustable Gastric Banding Observational Cohort Study	Ethicon Endo-Surgery (Europe) GmbH	Goran Ribaric, MD		+49-40-5297 ext 3125	gribaric@its.inj.com
Safety, Tolerability, Pharmacodynamic and Pharmacokinetics of a Single Rectal Application of 10 mg NRL001 in Elderly Subjects	Norgine	David Bell, MRCGP MFPM		+44 (0) 28 9081 8381	
International Survey of Acute Coronary Syndromes in Transitional Countries (ISACS-TC)	University of Bologna	Raffaele Bugiardini, MD		+39 335 5612962	raffaele.bugiardini@unibo.it

		Lina Badimon, MD		+34 670296741	badimon@csic-iccc.org
A Study of the Safety and Pharmacokinetics of PRO283698 in Patients With Rheumatoid Arthritis	Genentech	Ellen Ashley			ashley.ellen@genentech.com
Observational Study on Safety of Room Temperature Stable NovoSeven® in Patients With Haemophilia A or B	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk			clinicaltrials@novonordisk.com
Observational Study to Investigate the Occurrence of Bleeding in Postmenopausal Women Treated With 0.5 mg Estradiol and 0.1 mg Norethisterone Acetate for 12 Months	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk			clinicaltrials@novonordisk.com
Comparison of NN1250 Plus Insulin Aspart With Insulin Detemir Plus Insulin Aspart in Type 1 Diabetes: An Extension Trial to NN1250-3585 (BEGIN™)	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk			clinicaltrials@novonordisk.com
Clinical Management of Argatroban in Patients With Heparin Induced Thrombocytopenia Type II	Mitsubishi Tanabe Pharma Corporation	Mitsubishi Pharma Europe		+44 (0)20 7065-5000	information@mitsubishi-pharma.eu
Efficacy and Safety of Basal-bolus Therapy, Comparing Stepwise Addition of Insulin Aspart Versus Complete Basal-bolus Regimen (Full STEP™)	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867- 7178	
A Study to Evaluate Pre-emptive Treatment for Invasive Candidiasis in High Risk Surgical Subjects (INTENSE)	Astellas Pharma Inc	Medical Affairs Europe		44 (0)1784 419400	
Liver Transplant European Study Into the Prevention of Fungal Infection (TENPIN)	Astellas Pharma Inc	Medical Affairs Europe		44 (0) 1784 419 713	
Ibuprofen Suppositories Administration in Infants and Children	Soroka University Medical Center	EUGENE LEIBOVITZ, MD		972-8- 6244065	eugenel@bgu.ac.il
Multi-national Study Investigating the Effect and Safety of rFXIII on Transfusion Needs in Patients Undergoing Heart Surgery	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867- 7178	
Efficacy of NNC 0142-0000-0002 in Subjects With Rheumatoid Arthritis	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk		-	clinicaltrials@novonordisk.com

Liraglutide Effect and Action in Diabetes: Evaluation of Cardiovascular Outcome Results – A Long Term Evaluation (LEADER)	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7178	
Comparing Safety and Efficacy of NN5401 With Insulin Glargine in Subjects With Type 2 Diabetes: An Extension to Trial NN5401-3590 (BOOST™)	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7179	
Observational Study on Efficacy and Safety of Liraglutide in Subjects With Type 2 Diabetes (EVIDENCE)	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk		-	clinicaltrials@novonordisk.com
Safety and Efficacy of NNC 0142-0000-0002 in Subjects With Moderately to Severely Active Crohn's Disease	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk			clinicaltrials@novonordisk.com
Safety and Efficacy of Recombinant Factor VIII (N8) in Male Children Previously Treated With Haemophilia A	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7178	
Safety and Efficacy of N8 in Prevention and On-demand Treatment of Bleeding Episodes in Subjects With Haemophilia A: An Extension to Trials NN7008-3543 and NN7008-3545	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7179	
Efficacy and Safety of Liraglutide in Subjects With Type 1 Diabetes Undergoing Islet Cell Transplantation	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7180	
Observational Study of NovoPen Echo® on Safety and Treatment Satisfaction in Children and Adolescents With Type 1 Diabetes (REMIND™)	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk			clinicaltrials@novonordisk.com
Terlipressin Administration in Septic Shock Refractory to Catecholamines	Assaf-Harofeh Medical Center	Tal Mann, Dr		9725734578 9	tal_mb@hotmail.com
A Multiple Dose Trial of NNC 0151-0000-0000 in Subjects With Rheumatoid Arthritis	Novo Nordisk	Public Access to Clinical Trials – Novo Nordisk			clinicaltrials@novonordisk.com

A Study to Compare Two Medications With an Inactive Medication and Look at the Effect on a Person's Mental Ability	Astellas Pharma Inc	Medical Affairs Europe Limited		+44 (0) 1784 419 400	
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(SENIOR)					
Study of 2 Doses of Solifenacin Succinate in Female Subjects With Overactive Bladder. (SHRINK)	Astellas Pharma Inc	Medical Affairs Europe Ltd		+ 44 (0)1784 419 400	contact.gb@eu.astellas.com
Safety and Performance of the Automated Fluid Shunt in Patients With Ascites and Diuretic Resistance (PIONEER)	NovaShunt AG				
A Study Evaluating Safety and Tolerability of YM150 Compared to Warfarin in Subjects With Atrial Fibrillation (OPAL-2)	Astellas Pharma Inc	Astellas Pharma Europe BV Medical Clinical Development Department		+ 31 (0)71 54 55878	
Safety and Pregnancy Outcomes in Thrombocytopenia Patients Exposed to Xagrid Compared to Other Treatments	Shire Pharmaceutical Development	Shire Call Center		866-842-5335	
First-in-man Trial of NNC 0142-0000-0002 in Patients With Rheumatoid Arthritis	Novo Nordisk	Public Access to Clinical Trials - Novo Nordisk			clinicaltrials@novonordisk.com
Pharmacokinetics of a Single Intravenous Dose of Recombinant Factor XIII in Children With Congenital FXIII A-subunit Deficiency	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7178	
A Study to Evaluate the Safety and Efficacy of Denosumab and Ibandronate in Postmenopausal Women Sub-Optimally Treated With Daily or Weekly Bisphosphonates	Amgen	Amgen Call Center		866-572-6436	
International Registry for Severe Chronic Neutropenia	National Center for Research Resources (NCRR)				
Clinical- and Immunological Activity, Safety and Tolerability of Different Doses / Formulations of AFFITOPE AD02 in Early Alzheimer's Disease	Affiris AG	Vera Buerger, MSc		-	vera.buerger@affiris.com

PRIMARA: A Prospective Descriptive Observational Study to Review Mimpara (Cinacalcet) Use in Patients With Primary Hyperparathyroidism in	Amgen	Amgen Call Center		866-572-6436	
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Clinical Practice					
Human Anaplasmosis in Eastern France	University Hospital, Strasbourg, France	Yves HANSMANN, MD		33.3.69.55.05.45	yves.hansmann@chru-strasbourg.fr
Safety and Efficacy of N8 in Haemophilia A Subjects	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7178	
A Trial to Assess the Effect of Liraglutide on Gastric Emptying in Healthy Obese Volunteers	Novo Nordisk	Public Access to Clinical Trials - Novo Nordisk			clinicaltrials@novonordisk.com
Comparison of NN1250 Versus Insulin Glargine in Subjects With Type 2 Diabetes: An Extension Trial to NN1250-3579 (BEGIN™)	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7178	
Comparison of NN1250 Plus Insulin Aspart With Insulin Glargine Plus Insulin Aspart in Type 1 Diabetes: An Extension Trial to NN1250-3583 (BEGIN™)	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7179	
Double-Lumen Tube With or Without a Carinal Hook	Hopital Foch	Marc Fischler, MD		46252442 ext 00331	m.fischler@hopital-foch.org
Effects Of Exenatide On Liver Biochemistry, Liver Histology And Lipid Metabolism In Patients With Fatty Liver Disease	University of California, Davis	Marilyn Robinson		916-703-5501	marilyn.robinson@ucdmc.ucdavis.edu
Comparison of NN1250 With Insulin Glargine Plus Insulin Aspart With or Without Metformin and With/Without Pioglitazone in Type 2 Diabetes: An Extension Trial to NN1250-3582 (BEGIN™)	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7178	
Efficacy of Zinc Sulfate With Probiotics for the Treatment of Acute Diarrhea in Children	University Hospital No 1 Wroclaw	Leszek Szenborn, Prof		+48717703151	szenborn@zak.am.wroc.pl
		Ernest P. Kuchar, MD		+48717703156	kuchar@zak.am.wroc.pl
First-in-Man Trial of NNC114-0005 in Healthy Subjects and Subjects With Rheumatoid Arthritis	Novo Nordisk	Public Access to Clinical Trials - Novo Nordisk			clinicaltrials@novonordisk.com
Use of Phenoxybenzamine [PBZ] IV to Assist High Flow Low Pressure Perfusion [HFLPP] on Cardio-Pulmonary Bypass	The Cleveland Clinic	Muhammad A Mumtaz, MD		2164449125	mumtazm@ccf.org
		Brian W Duncan, MD		2164449365	duncanb@ccf.org

Phase 2 Safety & Efficacy of FOLFIRI in Combination With AMG 479 or AMG 655 vs FOLFIRI in KRAS-mutant Metastatic Colorectal Carcinoma	Amgen	Amgen Call Center		866-572-6436	
Evaluation of HumIRA® in Patients With Active Rheumatoid Arthritis, Psoriatic Arthritis and Ankylosing Spondylitis in EASTern European Countries (EviraEAST)	Abbott	Vanesa Cinotti Klepac, B.Sc.		+385 1 2350 538	vanesa.klepac@abbott.com
Use of Sodium Stibogluconate as a Treatment for Leishmaniasis	U.S. Army Medical Research and Materiel Command	Glenn Wortmann, MD			glenn.wortmann@amedd.army.mil
UMPIRE – Use of a Multidrug Pill In Reducing Cardiovascular Events	Imperial College London	Contact: Simon A McG Thom, MD, FRCP		4,42076E+11	s.thom@imperial.ac.uk
Observational Study on the Long Term Safety of Kuvan® Treatment in Patients With Hyperphenylalaninemia (HPA) Due to Phenylketonuria (PKU) or BH4 Deficiency (KAMPER)	Merck KgaA	Agnès Champigneulle, MD, PhD		+41 22 414 3000	agnes.champigneulle@merckserono.net
Transdermal Absorption of Dimercaptopropane-1-Sulfonate (DMPS) and Effect on Urinary Mercury Excretion	Banner Health	Anne-Michelle Ruha, M.D.		602-839-2342	michelle.ruha@bannerhealth.com
Oxidative Stress and Cardiac Arrest	Institut d'Anesthesiologie des Alpes Maritimes	Jean-Christophe Orban, MD		33611947008	orban.j@chu-nice.fr
		Carole Ichai, MD, PhD			carole.ichai@unice.fr
Evaluation of Middle Ear Implantation	Assistance Publique – Hôpitaux de Paris	Olivier STERKERS, MD, PhD		+33(0) 1 40 87 56 29	olivier.sterckers@bjn.aphp.fr
		Sophie Williams, BSc		27-11-276-8800	swilliams@witshealth.co.za
Sublingual Buprenorphine for Chronic Pain	National Institute on Drug Abuse (NIDA)	Russell K Portenoy, MD		212-844-1505	Rportenoy@bethisrael.org
Ribavirin for Hemorrhagic Fever With Renal Syndrome in Germany (HFRS)	: U.S. Army Medical Research and Materiel Command	MAJ Nicholas Conger, MD		DSN 314-486-8870	nicholas.conger@amedd.army.mil
		LTC Stephen Silvey, MD		DSN 314-486-8156	stephen.silvey@amedd.army.mil
Bendamustine HCL in Relapsed and Primary Refractory Hodgkin	Memorial Sloan-Kettering Cancer	Craig Moskowitz, MD		212-639-2696	

Lymphoma	Center				
		Paul Hamlin, MD		212-639-6143	
Oral Fluid Screening Devices	National Institute for Health and Welfare, Finland	Pirjo Lillsunde, Dr		+358947448342	pirjo.lillsunde@ktl.fi
		Charlotta Engblom, M.Sc.(Tech.)		+358947448546	charlotta.engblom@ktl.fi
Bevacizumab in Advanced Hepatocellular Carcinoma	Institut Gustave Roussy	Valerie Boige, MD		00 33 014-211-4308	boige@igr.fr
		Jean-Pierre Pignon, MD, PhD		00 33 014-211-4565	jppignon@igr.fr
Borrelia Species in Cutaneous Lyme Borreliosis	University Hospital, Strasbourg, France	Dan LIPSKER, MD		33.3.88.11.61.79	dan.lipsker@chru-strasbourg.fr
Safety of Liraglutide in Pediatric Patients With Type 2 Diabetes	Novo Nordisk	Novo Nordisk Clinical Trial Call Center		866-867-7178	
Mistletoe as Complementary Treatment in Patients With Advanced Non-Small-Cell Lung Cancer (NSCLC), Treated With Carboplatin/Gemcitabine Chemotherapy Combination: Randomized Phase II Study (Iscador)	Rambam Health Care Campus	Gil --- Bar-Sela, Dr. MD		+972-4-854-3810 ext	g_barsela@rambam.health.gov.il
Pilot Study of Raltegravir/Truvada Versus Efavirenz/Truvada for Adults With Acute IV-1 Infection	University of Alabama at Birmingham	Kerry Upton, RN		205-975-9128	
Host Responses in Kidney-transplant Recipients With Chronic Hepatitis E Virus Infection	Assistance Publique Hopitaux De Marseille	Valerie MOAL			valerie.moal@ap-hm.fr
Study of Glutamine as Prophylaxis for Irinotecan Induced Diarrhea	Alberta Health Services	Michael Sawyer, MD		780-432-8726	michsawy@cancerboard.ab.ca
French Evaluation Group Avastin Versus Lucentis (GEFAL)	Hospices Civils de Lyon	Laurent KODJIKIAN		0472071718 ext +33	laurent.kodjikian@chu-lyon.fr
		Jérôme MOLLARD		0472115439 ext +33	jerome.mollard@chu-lyon.fr
The Role of Patient Expectations in Traumatic Orthopedic Outcomes-TEFTOM EURASIA	AO Clinical Investigation and Documentation	No Contacts or Locations Provided			
Cerebral Toxoplasmosis	University	Daniel AJZENBERG,		33 5 55 05	aiz@unilim.fr

and AIDS (TOXODFA)	Hospital, Limoges	PharmD, PhD		61 60.	
Study of XL147 in Advanced or Recurrent Endometrial Cancer	Exelixis	PRA Contact Line		1-800-251-8124	
Convection Enhanced Localized Administration of PRX321 With Real-Time Imaging for Therapy of Recurrent Glioblastoma (CLARITY-1)	Protox Therapeutics	Patrick M Rossi, MD		609-744-3880	prossi@protoxtherapeutics.com
Assessing the OAB-8 Questionnaire as a Tool to Measure Treatment Outcome	Rambam Health Care Campus	Ilan Gruenwald, MD		00972-4-8542882	I.gruenwald@rambam.health.gov.il
		Yoram Vardi, Prof		00972-4-8542819	yvardi@rambam.health.gov.il
TF2- Small Cell Lung Cancer Radio Immunotherapy	Centre René Gauducheau	Please refer to this study by its ClinicalTrials.gov identifier: NCT01221675			
Clopidogrel and Aspirin for the Treatment of Polycythemia Vera (ISCLAP)	Myeloproliferative Disorders-Research Consortium	Raffaele Landolfi, MD		+309630154335	rlandolfi@rm.unica.it
		Ronald Hoffman, MD		212-241-1948	ronald.hoffman@mssm.edu
Gliogene: Brain Tumor Linkage Study	M.D. Anderson Cancer Center	Melissa Bondy, PhD		713-794-5264	
Clinical Evaluation of the Needleless® Sling	Samsung Medical Center	Kyu-Sung Lee, Ph.D		82-2-3410-3554	ksleedr@skku.edu
SPATAX: Clinical and Genetic Analysis of Cerebellar Ataxias and Spastic Paraplegias (Spatax)	Institut National de la Santé Et de la Recherche Médicale, France	Alexandra Dürr, MD, PhD		0033142162182	alexandra.durr@pmc.fr
Use of the Hansen Medical System in Patients With Atrial Fibrillation (ARTISAN AF)	Hansen Medical	Please refer to this study by its ClinicalTrials.gov identifier: NCT01122173			
		Deb Cardinal		512-458-9410	dscardinal@austinheartbeat.com
An Effectiveness Trial of Maintenance Therapy for Nicotine Dependence	University of Pennsylvania	Elisa Martinez, MPH		215-746-3109	emart@mail.med.upenn.edu
Lymphomyosot for Ankle Edema Following Fracture	Shaare Zedek Medical Center	Menachem Oberbaum, MD		972-2-6666395	oberbaum@szmc.org.il
Case Analysis on Real Life Incidence of Photodynamic Therapy (PDT) Safety Outcomes (CALIPSO)	Axcan Pharma	Michelle Depot, Ph.D		450 467 5138 ext 2190	mdepot@axcan.com

		Valérie Ratheau, M.Sc.		450 467 5138 ext 2096	vratheau@axcan.com
Second Generation" Drug-Eluting Stents Implantation Followed by Six Versus Twelve-Month - Dual Antiplatelet Therapy	Fondazione Mediolanum per Attività e Ricerche Cardiovascolari Onlus	Monica Repetto, Dr.		02.3453508 8 ext 29	repetto@mcr-med.com
Medico-Economic Comparison of Four Strategies of Radioiodine Ablation in Thyroid Carcinoma Patients (Estimabl)	National Cancer Institute, France	Martin SHCLUMBERGER, PhD		00 33 014- 211-6095	schlumbg@igr.fr
Community-acquired Methicillin-Resistant Staphylococcus Aureus Carriage Among Athletes (PSARM-S)	University Hospital, Limoges	Marie-Cécile PLOY, Professor		(+33)(0)555 056166	marie-cecile.ploy@unilim.fr
Stenting Versus Best Medical Treatment of Asymptomatic High Grade Carotid Artery Stenosis	Vienna General Hospital	Martin Schillinger, Prof. Dr.		0043/14040 0/4671	martin.schillinger@meduniwien.ac.at
National Cohort of Uncomplicated Alcoholic Cirrhosis (CIRRAL)	Assistance Publique - Hôpitaux de Paris	Nathalie GANNE, MD PH		+33(0)1 48 02 62 94	nathalie.ganne@jvr.aphp.fr
Safety of Photodynamic Therapy (PDT) in the Ablation of High-grade Dysplasia (HGD) in Barrett's Esophagus (BE) (Oedisse)	Axcan Pharma	Michelle Depot, Ph.D.		450 467 5138 ext 2190	mdepot@axcan.com
		Valérie Ratheau, M.Sc.		450 467 5138 ext 2096	vratheau@axcan.com
eRehab: Can Information and Communication Technology (ICT) Enhance Self-management of Cardiovascular Disease?	University Hospital of North Norwa	Konstantinos Antypas, MSc		4797613265	Konstantinos.Antypas@telemed.no
Early Goal-Directed Volume Resuscitation in Severe Acute Pancreatitis (EAGLE)	Technische Universität München	Wolfgang Huber, MD		0049 89 4140 2265	Wolfgang.Huber@lrz.tum.de
Utility of Antibiotic Treatment in Non-purulent Exacerbations of Chronic Obstructive Pulmonary Disease: a Double Blinded, Randomized, Placebo-controlled Trial of Security and Efficacy (AEPOC-ATB)	Fundacion Clinic per a la Recerca Biomédica	Nestor Soler, MD, PhD		+34 932.275.400 ext 2280	nsoler@clinic.ub.es
		Arturo Huerta, MD		+34 932.275.400 ext 5549	ahuerta@clinic.ub.es
Quantitative Requirements of Docosahexaenoic Acid for Neural Function in Children With	Ludwig-Maximilians - University of	Fabienne Faber, MD		49 89 5160 ext 7813	Fabienne.Faber@med.uni-muenchen.de

Phenylketonuria	Munich				
		Hans Demmelmair, PhD		49 89 5160 ext 3692	Hans.Demmelmair@med.uni-muenchen.de
SCOPE-Study: Salzburg Chronic Obstructive Pulmonary Disease-Exercise and Oxygen Study	Paracelsus Medical University	Josef Niebauer, MD, PhD, MBA		0043 (0)662 4482 ext 4270	j.niebauer@salk.at
		Sanz Miguel Angel, Dr		34 (96) 197 3057	msanz@uv.es
Treatment of Relapsed Promyelocytic Leukemia With Arsenic Trioxide (ATO)	PETHEMA Foundation	: Priego Miguel, Data manager		34 635 964 539	miquepriego@gmail.com
Failure and Cardiovascular Events in Community-acquired Pneumonia (FAILCAP)	University of Milan	Stefano Aliberti, M.D.			stefano.aliberti@unimi.it
		Francesco Blasi, M.D., PhD		0039 0250320627	francesco.blasi@unimi.it
PI or NNRTI as First-line Treatment of HIV in West Africa - the PIONA Trial	University of Aarhus	Sanne Jespersen, MD		89498491 ext 0045	sanne.jespersen@ki.au.dk
		Alex L Laursen, MD, DMSc		89498305 ext 0045	alexlaur@rm.dk
Atrial Fibrillation Registry for Ankle-brachial Index Prevalence Assessment: Collaborative Italian Study. (ARAPACIS)	University of Roma La Sapienza	Francesco Violi, MD		39 06-4461933	francesco.violi@uniroma1.it
		Giovanni Davi, MD		39-0871-541312	gdavi@unich.it
Quality of Life Among Children With Congenital Heart Disease	University Hospital, Montpellier	AMEDRO Pascal, MD		467336635	p-amedro@chu-montpellier.fr
Filling of Tooth Sockets With MBCP Gel TM Versus Technical Without Filling	Nantes University Hospital	Yves Amouriq		06 08 76 64 45	yes.amouriq@univ-nantes.fr
Extracorporeal Shockwave Treatment for Chronic Soft Tissue Wounds	AUVA	Michael PUSCH, MD		43-128-802	michael.pusch@gmx.at
The Effect of Inhaled N-Acetylcysteine Compared to Normal Saline on Sputum Rheology and Lung Function	University Hospital, Ghent	Sabine Van Daele, MD, PhD			sabine.vandaele@ugent.be
Influence of DPP-4 on Inflammatory Parameters in Diabetics: Gender Aspects	Medical University of Vienna	Jeanette Strametz-Juranek, MD		0140400 ext 4816	jeanette.strametz-juranek@meduniwien.ac.at
		Alexandra Kautzky-Willer, MD		0140400 ext 4314	alexandra.kautzky-willer@meduniwien.ac.at

Non-Micturation Bladder Activity in Relation to Self-Consciousness During Filling Phase and Sensation Measurement During the Filling Phase	Maastricht University Medical Center	Sajjad Rahnama'i, MD			sajjad_r@yahoo.com
Treatment Protocol for Relapsed Acute Promyelocytic Leukemia (APL) With Arsenic	German AML Cooperative Group	Eva Lengfelder, MD, PhD		0049 621 3834110	eva.lengfelder@med3.ma.uni-heidelberg.de
Efficacy Study of the Octapolar Lead in Patients With Failed Back Surgery Syndrome (FBSS) With Chronic Pain	Medtronic Neuromodulation Europe	Rik Buschman, PhD		31 6 209 101 85	rik.buschman@medtronic.com
Endomicroscopy in Ulcerative Colitis	PENTAX Europe GmbH	Ralf Kiesslich, Prof. Dr		49-613-117-7299	info@ralf-kiesslich.de
BeneMACS is to Show That HeartMate 2 (HM2) Left Ventricular Assist Device (LVAD) Survival in Non Transplant Patients is Equal/Better Than Results in Medical Literature (BeneMACs)	Thoratec Europe Ltd	Luc-Marie Jacquet		3227642712	Luc-Marie.Jacquet@uc-louvain.be
Dexamethasone, Ofatumumab and Bendamustine (DOT) First-line in Mantle-cell Lymphoma(MCL)	Southern Europe New Drug Organization	Michele Magni, MD			michele.magni@istitutotumori.mi.it
Lenalidomide and Paclitaxel in Advanced Solid Tumors	Southern Europe New Drug Organization	Monica Miani, Pharm.D.		+39 02764204(1) ext 33	mianim@sendo-org.it
		Laura Dal Zotto, Biol.Sc.		+39 02764204(1) ext 21	dalzottol@sendo-org.it
Sorafenib in Combination With RAD001 in Advanced Solid Tumors Selected on Molecular Targets	Southern Europe New Drug Organization	Filippo De Braud, MD		39 0257489482	filippo.debraud@ieo.it
Comparative Study of Ologen Collagen Matrix Versus Mitomycin-C in Trabeculectomy: A Study in Germany	Aeon Astron Europe B.V.	Thomas Dietlein, MD		+49-221-478-5862 ext 4300	thomas.dietlein@uk-koeln.de
Hyperthermia Treatment in Conjunction With Mitomycin C Versus BCG for Superficial Bladder Cancer	Medical Enterprises Europe B.V.	Yagel E Koren, MD		972-3-9244830	yagel@mel.co.il
		Naama Reich, MSc			naamar@mel.co.il
Prolonged Adjuvant Temozolomide vs "Stop & Go" in Glioblastoma Patients (PATSGO)	Cliniques universitaires Saint-Luc-Université Catholique de	Jean-Francois BAURAIN, MD, Ph		+32 2 764 54 71	jean-francois.baurain@uclouvain.be

	Louvain				
		Albert FOURNIER, Pr		+33 3 22 45 58 41	Fournier.Albert@chu-amiens.fr
		Ziad MASSY, Pr		+ 33 3 22 45 57 85	Massy.ziad@chu-amiens.fr
Nicotinamide Versus Sevelamer Hydrochloride on Phosphatemia Control on Chronic Hemodialysed Patients (NICOREN)	Centre Hospitalier Universitaire, Amiens				
Clinical Investigation to Assess the Safety and Feasibility of the Crestal, Minimal-invasive Sinus Floor Augmentation With the Pressure Chamber Drill (DKK) and the Sinus Vibration Pump (SVP) (DKK SVP)	Jeder GmbH	Michaela Bayerle-Eder, Prof.,			michaela.bayerle-eder@meduniwien.ac.at
Neurogenic Intermittent Claudication Evaluation Study (NICE)	Medtronic Spinal & Biologics ECA	Gino Mariën		+32 2 609 22 73	gino.marien@medtronic.com
		Attila Mihalyi, Ph.		+32 2 609 45 23	attila.mihalyi@medtronic.com
A Prospective, Randomized Clinical Study on the Effects of Casein Phosphopeptide-amorphous Calcium Phosphate (CPP-ACP) Paste on Plaque, Gingivitis and White Spot Lesions in Orthodontic Patients - Part 2	University Hospital, Ghent	Silvia Dauwe			silvia.dauwe@ugent.be
Effect of Protein Composition on Gastric Emptying	Ullevaal University Hospital	Groa B Johannesdottir, MD			groh@uus.no
		Charlotte Brun, MD			brap@uus.no
A Prospective, Randomized Clinical Study on the Effects of Casein Phosphopeptide-amorphous Calcium Phosphate (CPP-ACP) Paste on Plaque, Gingivitis and White Spot Lesions in Orthodontic Patients - Part 1	University Hospital, Ghent	Veronique Noens			veronique.noens@ugent.be
Prasugrel Versus Clopidogrel in Acute Coronary Syndrome (ACS) Undergoing Percutaneous Coronary Intervention (PCI)	University of Heidelberg	Evangelos Giannitsis, Prof. Dr.		+49 (0)6221-56- 8611	Evangelos_Giannitsis@med.uni-heidelberg.de
Incidence of Acute Cerebrovascular Events Using Either Minimized or Standard Cardiopulmonary Bypass Circuit (ROCsafe™)	Hannover Medical School	Ingo Kutschka, PD Dr. med.		0049-511- 532-2154	kutschka.ingo@mh-hannover.de

Monopolar Electrosurgery Versus Ultrasound Scissors in Thoracoscopic Ventral Spondylodesis (Harmonic)	University of Cologne	Christina Otto, MD		+49 221 478 86973	christina.otto@uk-koeln.de
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2.3 Main Stakeholders

We have identified the following main stakeholders:

- Clinicians / Care providers
- Chairpersons of research projects / trials
- Basic Researchers / Molecular biologists
- Computer Scientists
- Legal Experts / Ethicists
- Data Manager / Statisticians
- European Policymakers

The following tables list stakeholders related to Basic Researchers, Computer Scientists Ethics groups, Patient Organisations, Registries, Data Protection authorities, National authorities, Data Managers and Controllers and personal contacts. Those persons will actively be invited to participate in the survey.

Table 3. Basic Researchers

Institution	Contact Person	Function	Phone Number	email
University Würzburg Department of Biochemistry	Manfred Gessler (Prof.)	Director	+49 931 31 84160	gessler@biozentrum.uni-wuerzburg.de
Saarland University, Medical Faculty, Department of Human Genetics	Eckart Meese	Director	+49 6841 1626038	eckart.meese@uks.eu
University Kiel Department of Paediatrics	Martin Stanulla			martin.stanulla@uk-sh.de

Table 4. Ethics Groups

Institution	Contact Person	Function	Phone Number	email
Austrian Commission on Bioethics	Mag. Dr. Doris Wolfslehner Mag. Pia Paola Huber Gabriela Schwehla Birgit Berger		+43 1 531 15-2987 +43 1 531 15-2967 +43 1 531 15-4116 +43 1 531 15-2932	doris.wolfslehner@bka.gv.at pia-paola.huber@bka.gv.at gabriela.schwehla@bka.gv.at birgit.berger@bka.gv.at

				gv.at
Le Comité consultatif de Bioéthique de Belgique				
Bioetická komise Czech				rvv@vlada.cz
University Centre for Bioethics Czech			+420 549 494 913	ucb@med.muni.cz
The Danish Council of Ethics	Lise Wied Kirkegaard, cand.jur., MPK. Anne Lykkeskov, cand.comm.	Director of Secretariat Project Manager	+45 3524 0681 +45 3524 0651	lwk@etiskraad.dk al@etiskraad.dk
The Estonian Genome Foundation	Andres Metspalu M.D., Ph.D. Annely Allik Ene Mölder	Director Marketing and Communications Manager Contracts and Assets Administrator	(+372) 7440 242 +372 7 440 241 +372 7 440 240	andres.metspalu@geenivaramu.ee annely.allik@geenivaramu.ee ene.molder@geenivaramu.ee
National Advisory Board on Health Care Ethics (ETENE), Ministry of Social Affairs and Health (Finland)			+358 9 16001	etene@stm.fi
National Advisory Board on Research Ethics (Finland)	Sanna Kaisa Spoof Heidi Laine Aino Alatalo	Secretary General Assistant Project Assistant	+358-9-228 69 234 +358-9-228 69 235 +58-44-346 9990	sanna-kaisa.spoof@tsv.fi heidi.laine@tsv.fi aino.alatalo@tsv.fi
Finnish National Advisory Board on Biotechnology	Kimmo Pitkänen Jyrki Pitkälä Karoliina Niemi	Chairman & Research Coordinate Vice-Chairman & Senior Adviser Secretary & Senior Researcher	+358 9 191 25734 +358 9 16001 +358 9 160 52323	kimmo.pitkainen@helsinki.fi jyrki.pitkälä@ym.paristo.fi karoliina.niemi@mm.fi
Board for Gene Technology			+358 9 16001	gtek.stm@stm.fi
Comité Consultatif National d'Ethique (CCNE) (France)			+ 33 01 42 75 66 42	Contact: http://www.ccne-ethique.fr/contact.php
Nationaler Ethikrat Deutschland	Dr. Joachim Vetter Dr. Katrin Bentele Petra Hohmann	Leiter der Geschäftsstelle Wissenschaftliche Referentin Sekretariat	+49/30/203 70-242 +49/30/203 70-524 +49/30/203 70-242	vetter@ethikrat.org bentele@ethikrat.org hohmann@ethikrat.org
Hellenic Center for Biomedical Ethics			+30 210 7648 340	bioeth@otenet.gr info@bioethics.org.gr
National Bioethics Commission Greece	John Papadimitriou	Chairman	210-6972968	ipapadim@dunant.gr
The National Bioethics Committee	Berglind Hallgrímsdóttir Eiríkur Baldursson, PhD.	Secretary and Archivist	551-7100	berglind.hallgrimsdottir@vsn.stjr.is

Iceland	Þórunn Halldórsdóttir, Cand. Jur.	Managing Director Legal Adviser		eirikur.baldursson@vsn.stjr.is thorunn.halldorsdottir@vsn.stjr.is
The Irish Council for Bioethics	Siobhán O'Sullivan Emily de Grae Paul Ivory	Managing Scientific Director Communications & Outreach Manager Programme Manager	+353 1 878 3051 +353 1 878 3061 +353 1 878 3035	s.osullivan@bioethics.ie e.degrae@bioethics.ie p.ivory@bioethics.ie
Comitato nazionale per la bioetica (Italy)	Dr Agnese Camilli Mrs. Lorella Autizi Mrs. Anna Piermarini Mr. Daniele Tedesco	Secretariat Coordinator Administrative Secretariat	0039-06.67794601	a.camillicnb@governo.it l.autizi@governo.it a.piermarini@governo.it d.tedesco@governo.it
Lithuanian Bioethics Committee			(+370 5) 212 45 65	lbek@sam.lt
CNE - Commission Nationale d'Ethique (Luxembourg)			+352 247 86628	info@cne.public.lu
Ministry of Health, the Elderly and Community Care (Malta)	Dr. Michael Ascjak MD, M.Phil.	Chairman of the Bioethics Consultative Committee		michael.ascjak@gov.mt
Forskningsetiske komiteer (Norway)	Matthias Kaiser Professor Dag E. Helland	Director Chair	+47 23 31 83 04 +47 55 58 45 19	post@etikkom.no
Research Ethics Committee - UK	Dr Janet Wisely	Director		janet.wisely@nres.npsa.nhs.uk
Federal Ministry of Social Security and Generations	Dr. Michael HAAS		4,31711E+11	michel.haas@bmsg.gv.at
Geschäftsstelle der Bioethikkommission, Bundeskanzleramt	Dr. Robert GMEINER		43148796	robert.gmeiner@bka.gv.at
Abt. VI/1 - Forschungspolitische Grundsatzangelegenheiten und Biowissenschaften	Ministerialrat Dr. Reinhard KLANG		Wien Tel +43 1 53120/6018	Reinhard.Klang@bmbwk.gv.at
Coordinateur Comité Consultatif de Bioéthique	Mr. E. MORBE		Tel.: +32.2.210.4 2.23	eric.morbe@health.fgov.be
	Or Mrs Monique BOSSON		Tel : +32.2.210.4 6.25	monique.bosson@health.fgov.be
Fertility Clinic Dept. Ob. Gyn. Hôpital Erasme, Free University Brussels	Prof. Yvon ENGLERT		Phone: +32.2.555.4 5.70	yenglert@med.ulb.ac.be
Det Etske Råd	Berit ANDERSEN FABER		Tel. : +45.3537.58 33	Berit.Faber@etiskraad.dk

Head of Section Ministry of Science, Technology and Innovation Forskningspolitisk Kontor	Gunvor NIELSEN		Tel. : +45.3395.40 19	gni@vtu.dk
Head of Section Ministry of Science, Technology and Innovation	Johannes Lundin BROCKDORFF		Tel. : +45 3392 9943	jlb@vtu.dk
Indenrigs- og Sundhedsministeriet	Maja-Lisa AXEN		tlf. 33 92 32 55	mla@im.dk
General Secretary National Advisory Board on Health Care Ethics Ministry of Social Affairs and Health	Mrs. Ritva HALILA		tel. +358-9- 160 73834, +358-50-370 6521 (mobile)	ritva.halila@stm.vn.fi
Board Director	Dr. Marja SORSA		Tel. : +358.9.463. 221	marja.sorsa@transmix.fi
Secretary General Nordic Committee on Bioethics	Helena VON TROIL		Tel. : +358.40.544 .9981	helena.troil@archeon.fi
Président du Comité Consultatif National d’Ethique pour les Sciences de la Vie et de la Santé	Prof. Didier SICARD		Tel.: +33.1.44.42. 48.52	contact@comite-ethique.fr
Ministère Délégué à la Recherche Direction de la Recherche	Mme Laurence LEPIENNE		Tél: +33.1.55.55. 83.71	laurencelepienne@aol.com
Chairman of the German National Ethics Council Nationaler Ethikrat	Prof. Dr. Dr. h.c. Spiros SIMITIS		Tel.: +49.30.203. 70.242	kontakt@ethikrat.org
German National Ethics Council	Frauke ALBERS		Tel +49/30/2037 0-242	albers@ethikrat.org
Head of Division 611 Development of Biosciences; Ehtics and Law Federal Ministry of Education and Research	Dr. Stephan ROESLER		Tel. +49- 1888- 573660	stephan.roesler@bmbf.bund.de
Institute of Philosophy University of Regensburg	Prof. Dr. Dr. Joseph SCHMUCKER VON KOCH		Tel. : +49 160 6008 109	joseph.schmucker-von-koch@psk.uni-regensburg.de
National Bioethics Commission	Dr. Takis VIDALIS		Tel. : +30.210.88. 47.700	T.vidalis@bioethics.gr
Deputy Chairman of Greek National Committee on Bioethics University of Patras Medical School	Prof. George MANIATIS			maniatis@otenet.gr
Chair Irish Council for Bioethics Academy House	Prof. Patrick FOTTRELL		Ph (switchboard): 00 353 1 6611901	

Scientific Director Irish Council for Bioethics Academy House	Siobhan O'SULLIVAN		Phone: 00 353 1 6611901	s.osullivan@bioethics.ie
Faculty of Law University College Cork	Dr. Deirdre MADDEN		Tel. : +353.21.490 2990	dm@ucc.ie
President of the Italian National Bioethics Committee	Prof. Francesco D'AGOSTINO		Tel.: +39.06.48.1 61.490	dagostino@lettere.uniroma2
Scientific Secretary Italian National Bioethics Committee	Dr. Stephane BAUZON			s.bauzon@governo.it
Segretario della Commissione di Bioetica del CNR	Prof. Emilio MORDINI		Tel. : +39.06.474. 01.44	e.mordini@bioethics.it
Ministère de la Culture, de l'Enseignement Supérieur et de la Recherche Commission consultative nationale d'éthique pour les sciences de la vie et de la santé	Mr. Jean-Paul HARPES		Tel.: +352.478.66 28	jean-paul.harpes@education.lu
Health Council of the Netherlands	Dr. Wybo J. DONDORP		Tel.: +31.70.340. 6575	wj.dondorp@gr.nl
Empreendimento das Amoreiras, Torre 2, 16°	Mrs. Paula MARTINHO DA SILVA		Tel. : +351.21.384 .33.00	Pmartinho@bap.pt
	Prof. Daniel SERRAO		Tel. : +351.22.832 .5071	rdd23956@mail.telepac.pt
University of Deusto Inter-University Chair in Law and in Human Genome	Prof. Carlos M. ROMEO- CASABONA		Tel.: +34.94.445. 57.93	cromeo@genomelaw.deusto.es
				cromeoca@terra.es
Uppsala University Faculty of Law	Dr. Elisabeth RYNNING		Tel. : +46.18.471 20 03	elisabeth.rynnings@jur.uu.se
Associate Professor of Law Head Secretary to the Parliamentary Committee on Genetic Integrity	Prof. Hans GUNNAR- AXBERGER			hans-gunnar.axberger@telia.com
Deputy Branch Head Genetics and Assisted Conception Branch Department of Health	Anthony J. TAYLOR		Tel. : +44.020.797 2.1516	Anthony.Taylor@doh.gsi.gov.uk
Public Liaison Officer Nuffield Council on Bioethics	Ms Nicola PERRIN		-	nperrin@nuffieldfoundation.org
Head of the Ethics Committee of the Ministry of Health of the Czech Republic, Member of the Bioethics Commission of the Scientific Council of the Government, Teacher of Social Medicine and	Mrs. Dagmar POHUNKOVÁ, M. D.		420 - 257 530 738	dagmar.pohunkova@seznam.cz office at the Ministry: rudolf.pisch@mzcr.cz

Medical Ethics at the 1st Medical Faculty of the Charles University at Prague (retired)				
Senior Counsel of the Republic Office of the Attorney General of the Republic of Cyprus and the President of the Cyprus	Mrs Rena PETRIDOU		357 22889103 or 357 22899100	repetridou@yahoo.co.uk
Chairman of the Estonian Council on Bioethics University of Tartu Dept of Neurology and Neurosurgery	Prof. Arvo TIKK			Arvo.Tikk@kliinikum.ee
Secretary of the National Ethics Committee The address of the Committee is Ministry of Health	Dr. Laszlo SZONYI			szolasz@gyer1.sote.hu
Head of Central Medical Ethics Committee of Latvia	Laima RUDZE		Tel.: +371.7043.7 22	laima.rudze@voava.lv
Lithuanian Bioethics Committee	Dr. Eugenijus GEFENAS		Tel. : +3702 224 565	lbec@sam.lt
Chairman of the Bioethics Consultative Committee The Ministry of Health	Dr. Michael Ascik MD, M.Phil.			michael.asciak@gov.mt
Warsaw University Head of Human Rights Research Centre	Prof. Andrzej RZEPLINSKI		Tel. : +48.22.55.3 07.32	rzepa@neptun.ci.uw.edu.pl
				rzepa@hfhropol.wa.w.pl
Department of Clinical Pharmacology, Slovak Health University, Institute of Medical Ethics and Bioethics Fdn.	Assoc. Prof. Jozef GLASA, M.D., PhD		tel. +421-2- 59369.472,	glasa@upkm.sk
Chair National Medical Ethics Committee	Prof. Jože TRONTELJ		Tel. : +386.1.522. 1525 Tel. : +386.1.522. 1500	
Department of Immunology Landspítali – University Hospital	Dr. Ingileif JONSDOTTIR			ingileif@landspitali.is
Secretary of Natural Sciences Israel Academy of Sciences and Humanities	Yossi SEGAL		Tel.: 972.2.567.6 220	yossis@academy.ac.il
Chair, Bioethics Committee, Israel Academy of Sciences and Humanities. Department of Molecular Genetics Weizman Institute of Science	Prof. Michel REVEL		Phone: 972- 8-9342101	michel.revel@weizmann.ac.il
Seniorrådgiver Bioteknologinemnda	Ole Johan BORGE, Ph.D.		Tlf.: 22 24 87 96 / 97 50 05 83,	ole.borge@bion.no
Generalsekretärin der Schweizerischen Akademie der	Dr. Margrit LEUTHOLD		Tel.: +41.61.269.	leuthold@samw.ch

Medizinischen Wissenschaften			90.30	h
Président de la Commission Centrale d'Ethique de l'Académie Suisse des Sciences Médicales Division d'Endocrinologie Hôpital Universitaire de Genève	Michel VALLOTTON			Michel.B.Vallotton@hcuge.ch
Wissenschaftlicher Sekretär - Executive Secretary Nationale Ethikkommission (NEK) im Bereich Humanmedizin - Swiss National Advisory Commission on Biomedical Ethics p.A. Bundesamt für Gesundheit	Georg AMSTUTZ		Tel. direkt +41 31 324 93 65 - Tel. Sekretariat +41 31 324 02 36	
Ethikkommission Ärztekammer des Saarlandes	Prof. Dr. Schieffer	Head of the EC		

Table 5. Patients Organisations

Institution	Contact Person	Function	Phone Number	email
Vlaams Patiëntenplatform	Roel Heijlen		+32 16 230526	roel.heijlen@vlaamspatientenplatform.be
ICCCPO	Mrs Marie-Marthe Bruck-Clees	Chairwoman parents group: Een Häerz fir kribbskrank Kanner	+352 51462926	mmbruck@kriibskrankanner.lu
Kinder-Krebs-Hilfe	Mrs Anita Kienesberger	Chariwoman	+43 1 402 88 99	oesterreichische@kinderkrebshilfe.at

Table 6. Registries

Institution	Contact Person	Function	Phone Number	email
ECRIN	Prof. Dr. Christian Ohmann, KKS Düsseldorf	Scientific coordinator of KKS Düsseldorf,	+49 (0) 211 / 81-19701	Christian.Ohmann@uni-duesseldorf.de

		Contact person to ECRIN		
EATRIS	Prof. Dr. Rudi Balling	Coordinator of EATRIS	+352 4666 44 6973	rudi.balling@uni.lu
GPOH	Prof. Dr. Ursula Creutzig	Executive Secretary of GPOH	0511-604 6677	ucreutzig@onlinehome.de
BBMRI	Prof. Dr. Jan-Eric Litton, Stockholm	deputy director of BBMRI.se	070-836 6810	Jan-Eric.Litton@ki.se
Saarländisches Krebsregister	Fr. Dr. C. Stegmaier	Scientific coordinator of the Saarländische Krebsregister, Contact person to other Cancer Registries	0049 (0) 681/501-5982	krebsregister@gbe-ekr.saarland.de
I-BFM	Prof. Dr. Martin Schrappe	Scientific Chairman of I-BMF		martin.schrappe@uk-sh.de
SIOP Europe	Fr. Prof. Dr. Ladenstein	Chairwoman of SIOP Europe	+43 (1) 404 70-0	ruth.ladenstein@ccri.at

Table 7. Data Protection Authorities

Institution	Contact Person	Function	Phone Number	email
Czech R. - Úřad pro ochranu osobních údajů	PhDr. Hana Štěpánková	spokeswoman	234 665 286	hana.stepankova@uoou.cz
Denmark - Datatilsynet				dt@datatilsynet.dk
Ireland - Data Protection Commissioner Canal House Station Road Portarlinton Co. Laois Ireland	Stewart Fennell	Information Officer	057 868 4800	info@dataprotection.ie
Slovenia - Information Commissioner	Urban Brulc		00386 (0) 1 230 97 78	Urban.Brulc@ip-rs.si
Sweden - Swedish Data Inspection Board	Erik Janzon	Legal advisor & Team leader	+46 70 728 64 32	Erik.Janzon@datainspektionen.se
Austria - DPA	Mag. Georg LECHNER		Tel: ++43 (1) 531 15 / 2946	Georg.LECHNER@dsk.gv.at

Belgium - Belgische Commissie voor de Bescherming van de Persoonlijke Levenssfeer	Veerle Meynckens			Veerle.Meynckens@privacycommissie.be
Cyprus - Administrative Officer A' Office of the Commissioner for Personal Data Protection	Marios Papachristodoulou	Administrative Officer	Tel.: +357 22818303	mpapachristodoulou@dataprotection.gov.cy
Lithuania - State Data Protection Inspectorate	Dr. Algridas Kuncinas // B Jurgeleviciene	Director	tel. (370) 5279 1445	ada@ada.lt
Bulgaria - Commission for Personal Data Protection	Desislava Toshkova - Nikolova	Director of the Directorate for Legal and International affairs		d.nikolova@cpdp.bg
Bulgaria - Commission for Personal Data Protection	Virginia Tabakova	Expert of the Directorate for Legal and International affairs		vtabakova@cpdp.bg

Table 8. Personalcontacts

Institution	Contact Person	Function	Phone Number	email
Gert-Jan van Ommen	Gert-Jan van Ommen			
NHS Connecting for Health, UK	Ken Lunn			
LBNL, USA	Paul Spellman			
University College London, UK	Bernadette Modell			
University Medical Center Groningen,NL	Alexandros Kanterakis			
Ontario Institute for Cancer Research, Canada	Vincent Ferretti			
Cancer Research UK	Carlos Caldas			
University College London, UK	Dipak Kalra			
Norwegian Institute of Public Health, Norway	Astanand Jugessur			
GlaxoSmithKline, UK	Samiul Hasan			
Professor of Health Informatics and Director of the Centre for Health Informatics and Multiprofessional Education, University College London	David Ingram			d.ingram@ucl.ac.uk

3 Description of Questionnaire

3.1 Introduction to the questionnaire

An introduction by explaining the questionnaire to the different stakeholders and to provide information about data security and confidentiality issues related to the survey will be given at the beginning of the questionnaire. The participants will also be asked if they want to receive a summary of the results of the survey.

The opening paragraph of the questionnaire is as follows (in brown-red):

PLEASE READ BEFORE STARTING

This survey is part of a European Collaborative Project called **CONTRACT** (Consent in a TRIal and Care environment) funded in the 7th Framework Programme (Grant agreement 261412). **CONTRACT** will support translational research projects – both ongoing and upcoming. It will develop a multidisciplinary approach in delivering facts and figures on different approaches to informed consent both in European projects and in European Member States. **CONTRACT** will analyze the IT-related representation of these different understandings and the outcome of these differences in the daily clinical and/or research routine. For more information about the project please visit our website: <http://www.contract-fp7.eu/>.

This **questionnaire** will analyse the current situation concerning the legal, ethical, technical and clinical handling of consent, mainly in European projects dealing with vulnerable patient groups. The purpose is to identify existing practices and problems encountered in translational research throughout Europe.

By participating in this survey **you will help us** to advise translational research projects in all issues of informed consent and to deliver concrete policy recommendations as to how the European Union could jointly protect patient's rights and support translational research by a better structured approach towards consent issues. In addition you will be able to access to the prelaunch version of the CONTRACT helpdesk which will provide advice on aspects of informed consent in a research setting. (please see <http://www.contract-fp7.eu/> for further details).

The survey is addressed to

- Clinicians / Care providers,
- Chairpersons of research projects / trials,
- Researchers / Molecular biologists,
- Computer Scientists,
- Legal Experts
- Ethicists,
- Data Manager / Statisticians and
- European Policymakers.

The questionnaire takes approximately 30 minutes to complete and we would be very grateful if you could take this time to fully complete all questions.

The data is raised and processed for this survey only. The data will be anonymised wherever possible before processing and destroyed **after two years**. You may revoke your consent to the processing of your personal data at any time. In this case, all your personal data will be deleted immediately. Please contact us if you have any questions or if you would like to get more information about the survey. If you would like to receive the results of this questionnaire by email, please provide us with your email address:

- Yes, I want to be notified about the results of this survey and for that purpose provide you with my email address: _____@_____

For any questions regarding this survey please send an e-mail to:

Institut für Rechtsinformatik / Gottfried Wilhelm Leibniz Universität Hannover

Prof. Dr Nikolaus Forgó - forgo@iri.uni-hannover.de ☐

Magdalena Góralczyk - goralczyk@iri.uni-hannover.de

Königswohrter Platz 1 ☐ 30167 Hannover ☐ Tel: +49-511/762-8159

Many thanks for your contribution.

The survey team

3.2 Sections of the questionnaire

The questionnaire is divided into 6 different sections. These sections are listed in the below table showing the number of questions and which stakeholders have to answer them.

	Section	number of questions	to be answered by
1	General	35	all
2	Clinical care	11	all
3	Research	3	researchers
4	IT related		
	Clinical care context	21	IT experts
	Clinical trial context	11	IT experts
5	Legal and ethical issues	31	all
6	Handling	6	all

3.3 Development of the questionnaire

The questionnaire was developed in an iterative process between all members of the consortium of CONTRACT. This was done via email, telephone conferences and meetings. The last meeting took place in Homburg on the 14th of February 2011.

A prefinal version was sent to different stakeholder groups (GPOH, I-BFM and SIOP Europe) to obtain feedback on the questionnaire which provided valuable feedback in particular for section 2 (clinical care) of the questionnaire.

Griet Verhenneman and Magdalena Góralczyk presented the questionnaire at the ENCCA Meeting in Brussels on the 10th of February 2011. The participants of the meeting showed a high level of interest in participating and clearly acknowledged that consent is a problematic issue especially in clinical trials.

4 The proposed dissemination of the questionnaire

The questionnaire will be made available via the website of CONTRACT. People who have already given their consent in taking part in the survey will be notified by email with the link to the questionnaire.

The link to the questionnaire will also be sent to the targeted projects and other stakeholders as given in tables 1-11 for distribution to their members. Some of the targeted projects also agreed to link to the questionnaire through their website, like GPOH, SIOP Europe.

To avoid double entry or spam entries each respondent needs to register and will receive immediately a token which allows him to enter the questionnaire.

5 Technical implementation

The technical implementation will be done by Custodix.

6 Appendix – The questionnaire

The following pages list the whole questionnaire.

Questions highlighted in green are not mandatory to answer.

Text highlighted in yellow gives explanations to the following questions.

Questions with green bars will have 6 **discrete** possibilities to answer.

Final Questionnaire

1. General [questions 1.1 to 1.24 are to be answered by everybody]

1.1 How old are you? [] years

1.2. What is your gender? [] male [] female

1.3 What is your highest professional degree/diploma?

- Primary school
- High school
- Bachelor
- Master or equivalent
- State Exam
- MD
- PhD or other
- Professor at a University
- Other

1.4 In which country do you work?

- European Countries
 - Albania
 - Andorra
 - Armenia
 - Austria
 - Azerbaijan
 - Belarus
 - Belgium
 - Bosnia and Herzegovina
 - Bulgaria
 - Croatia
 - Cyprus
 - Czechia
 - Denmark
 - Estonia
 - Finland
 - France
 - Georgia
 - Germany
 - Greece
 - Hungary
 - Iceland
 - Ireland
 - Italy

- Kazakhstan
- Latvia
- Lichtenstein
- Lithuania
- Luxembourg
- Macedonia
- Malta
- Moldova
- Monaco
- Montenegro
- Netherlands
- Norway
- Poland
- Portugal
- Romania
- San Marino
- Serbia
- Slovakia
- Slovenia
- Spain
- Sweden
- Switzerland
- Turkey
- Ukraine
- United Kingdom
- Vatican City
- Non-European Countries
 - Africa
 - Asia
 - Australia
 - North America
 - South America

1.5 What is your profession?

- Physician
- .Molecular biologist
- Bioinformatician
- Computer Scientist
- Statistician
- Lawyer
- Ethicist
- Auditor for clinical trials
- Manager
- Politician
- Other

1.6 Where are you employed?

- University
- Large Industry
- SME (small medium enterprise)
- Government (public) service
- Self-employed
- Other

- 1.7 Can you please specify the role in which you are answering this questionnaire?**
- Clinician / Care provider
- Chairperson of an international pharmaceutical Trial
- Chairperson of an international investigator initiated trial
- Chairperson of a national pharmaceutical Trial
- Chairperson of a national investigator initiated trial
- Coordinator of a European research project
- Coordinator of a National research project
- Scientist
- Medical Society member
- Member of an Ethics Committee
- Computer scientist
- Legal practitioner
- Data manager / Statistician
- Auditor of clinical trials
- Data protection officer
- Data protection Authority official
- Patient association/organisation member
- Registry employee
- Politician
- Regulatory Authority official
- Other

1.7a In case of 'other', please specify other: _____

1.8 For how many years have you been dealing with issues of obtaining consent in your work?

_____ years

1.9 Did you ever sign a consent form as a patient or for someone else?

- Yes
- No

(if no, continue with question 1.10)

1.9.1 If yes, for whom did you sign:

- Myself

- My child
- For someone else as a legal guardian

1.9.2 Have you retained a copy of the consent form?

- Yes
- No, I did not receive a copyNo

1.9.3 How comfortable were you in general with the process of obtaining consent?



1.9.4 Did you feel that the consent form you filled in together with written information explained the medical information sufficiently?



1.9.5 Did you feel that the consent form you filled in together with written information explained the legal information sufficiently?



1.9.6 How did the process of giving consent influence your concerns related to the subject of the consent?

a) with respect to the medical procedures to be undertaken



b) with respect to the sensitivity and handling of your data



1.10 Are you familiar with legal requirements regarding the content of consent procedures?



1.11 In how much detail should a consent form/procedure explain medical information?



1.12 In how much detail should a consent form/procedure explain legal information?



1.13 Should there be different practices of obtaining consent for care and research environments?

- Yes
- No

1.14 Which of the following aspects do you consider should be included in consent forms for clinical trials?

Please mark every item that is needed.

- The trial is always research
- Purpose of the trial
- Trial treatment(s)
- Trial procedures
- Data protection
- The participant's responsibilities
- Experimental trial aspects
- Foreseeable risks or inconveniences
- Expected benefits for patients
- Expected benefits for general public

- Alternative procedure(s) or treatment(s)
- Compensation and/or treatment available in the event of trial-related injury
- Payment to participants
- Expenses for participants
- Information about liability issues
- Participation is voluntary, and the participant may refuse to participate or withdraw from the trial at any time
- The monitor(s), the Ethical Committee, and the regulatory authority(ies) will be granted direct access to the participant's medical records
- Records identifying the participant will be kept confidential to all parties with the exception of those specified before
- The participant or representative will be informed if information becomes available that may be relevant to their willingness to continue participating in the trial
- Person(s) to contact for further information regarding the trial, rights of trial participants, and in the event of trial-related injury
- Circumstances and/or reasons under which participation on the trial may be terminated by the sponsor
- Expected duration of trial participation
- Approximate number of participants involved in the trial

1.15 Which of the following aspects do you consider should be included in consent forms for clinical care?

Please mark every item that is needed.

- Purpose of the treatment or diagnostic procedure
- Data protection
- The participant's responsibilities
- Foreseeable risks or inconveniences
- Expected benefits for patients
- Alternative procedure(s) or treatment(s)
- Treatment available in the event of side effects
- Information about liability issues
- Participation is voluntary, and the participant may refuse to participate or withdraw at any time
- Records identifying the participant will be kept confidential
- Person(s) to contact for further information
- Expected duration of the treatment or diagnostic procedure
- Approximate number of patients undergoing the diagnostic procedure by the specific physician doing the procedure
- Approximate number of patients with this disease being treated by the specific physician

1.16 Are you familiar with the re-consent procedure?

- Yes
- No

(if no, continue with question 1.17)

1.16.1 How important is obtaining re-consent from a legal point of view?



1.16.2 In your opinion should such a procedure be obligatory?

- no
- yes, for under-aged patients
- yes, for all the patients

1.16.3 When should a re-consent be obtained to your opinion? (More than 1 point in time can be marked)

- Never
- Once a patient turns 14
- Once a patient turns 16
- 4 weeks after the begin of a trial treatment
- At the end of a trial
- Every time data or biological material is needed for a new research topic
- Every time biological material is used
- After every amendment of a trial

1.17 How important is the role of physician when obtaining consent?



1.18 How important is the attitude of the physician to the project when obtaining consent?



1.19 How much previous experience in clinical care should a physician obtaining consent have?



1.20 Is it possible in your opinion to obtain informed consent without speaking to the patient, e.g. Using only paper based or electronic mailing methods?

- Yes
- No

1.21 How important is it to provide an information sheet for the patient to allow him/her inform him/herself about the project?



1.21.1 Should this information sheet be accompanied by a face to face consultation in any case?

- Yes
- No

1.22 Do you think that patients have difficulties *in general* to understand consent forms and procedures?

- Yes
- No

1.23 How many patients do you think understand all items addressed in consents forms and procedures?



1.24 To what extent do the requirements to obtain informed consent restrain research in general?



[The questions 1.25 to 1.35 are only for chairpersons of trials and coordinators of projects]

**1.25 If you are a chairperson of a project or a trial that needs to obtain consent(s) would it be possible to receive the templates used for consent procedures for analysis?
Would you be willing to upload your templates for obtaining consent for analysis here?**

If yes, can you please upload here:

If yes, is it possible to receive the project or trial protocol to analyse the completeness of your consent:

If yes, can you please upload here:

If it is not possible to upload, can you send these documents by postal service to:

Prof. Dr. Nikolaus Forgó
Gottfried Wilhelm Leibniz Universität Hannover
Institut für Rechtsinformatik
Raum Nr.: II/839
Königsworther Platz 1
30167 Hannover

1.26 What kind of project are you running?

- Prospective clinical trial
- Retrospective clinical trial
- An epidemiological project
- A research project where only retrospective data are used which does not influence the diagnosis or treatment of current patients
- Other

1.26a If you are running a prospective clinical trial, is this (multiple answers possible):

- Randomised
- Multicentre
- International inside Europe
- International outside Europe

1.27 Did you compile the consent forms for your project/trial by yourself?

- Yes
- No

1.27.1 If yes, how difficult was it for you to compile the consent forms for your project?



1.28.2 if no, who compiled it? _____

1.28 Did you use a template to write the consent forms for your project?

- Yes
- No

1.28.1 if no, would a template have been helpful?

- Yes
- No

- 1.28.2 If yes, would you be willing to pay for such a template/service? Yes**
- No

1.29 Did you need to change the consent forms/procedures after an ethical review of your project?

- Yes
- No

1.30 Do you think you have addressed all items that are legally and ethically needed in terms of informed consent in your project?

- Yes
- No

1.31 Do you know whether patients have difficulties to understand *your* consent forms and procedures?

- Yes
- No

1.32 How many patients do you believe understand all items addressed in the consent procedures of your project?



1.33 In how many languages do you provide the consent forms and procedures in your project? []

1.34 Do you provide an information sheet to patients to inform themselves about the project?

- Yes
- No

1.35 Please specify the minimal and maximal number of different consents forms that you provide for a single patient?

- Minimal _____
- Maximal _____

2. Clinical Care

[questions 2.1 to 2.11 have to be answered by everybody]

2.1 Do you see a discrepancy between actual clinical practice and the legal and ethical regulations for clinical practice?



2.2 What is the maximal number of different consent forms that should be provided for a patient taking part in a trial? _____

2.3 Should there be a maximum number of pages of written information given to a patient at once?

- Yes
- No

2.3.1 If yes, how many pages of written information for patients do you think are acceptable? _____

2.4 Should there be a maximum number of pages of written information given to a patient for one disease, treatment or diagnostic procedure?

- Yes
- No

2.4.1 If yes, how many pages of written information for patients do you think are acceptable? _____

2.5 In your experience, how useful is this information for patients to understand what is happening?



2.6 As far as you know such written information, how useful is this information for patients to agree with what is happening?



2.7 How much time should a patient be given to reflect before he is asked to sign a consent form for any kind of procedure or treatment according to your opinion?

- < 1 hour
-
- 1 - 6 hours
- 6 - 12 hours
- 12 - 24 hours or including one night
- 24 – 48 hours
- 3 to 5 days
- > 5 days

2.7.1 Should there be more time given as stated above in case of a prospective randomized trial?

- Yes
- No

2.7.2 Does this match with the legal / ethical requirements of informed consent?

- Yes
- No
- There are no legal requirements

2.8 Can you estimate the average time period between diagnosis to the time at which consent is given by patients/parents/legal guardians in general today?

2.9 What is the time frame in which consent forms need to be signed by patients/legal guardians?

- There is no legally binding timeframe
- I do not know

2.10 What are your suggestions for improvement of obtaining informed consent in clinical care?

2.11 To what extent would such improvements influence the future of clinical trials?



3. Research [questions 3.1 to 3.3 have to be answered by clinical and basic researchers]

3.1 Did you experience barriers in any of your research projects as a consequence of unclear or lack of informed consent?

- Yes
- No

3.2 To what extent did these barriers affect the research?



3.3 How easy is it to overcome these barriers?



4. IT related – Clinical Care Context

[questions 4.1 to 4.22 relate to the clinical care context. They are targeted towards people working with or familiar with the Electronic Health Record System (EHR) /Electronical Medical Record (EMR) used in their organization]

4.1 Does your Electronic Health Record System (HER)/Electronical Medical Record (EMR) serve as access point to the majority of medical data (excluding administrative data and appointment scheduling) that is available on a patient in the hospital?

- Yes, our Hospital Information System (HIS) comes from single vendor
- Although the HIS is segmented over the hospital, cross department data access is possible
- No, different information silos exist in the hospital

4.2 Do you use a commercial EHR/EMR solution?

- No
- Yes, Vendor

4.2.1 In case of 'yes, Vendor', please specify Vendor:

4.3 Do patients give care-related consent by signing paper forms?

- Yes
- No

4.3.1 If yes, do you archive the paper consent forms electronically? (e.g. signed paper consent forms)

- Yes
- No

4.4 If consent is archived, is that done centrally?

- Yes
- No

4.5 Is the patient consent (also) recorded electronically? (if yes, check all that apply)

- Yes, the patient can give consent using an electronic signature
- Yes, the data management application requests the physician to record electronically in the application that the patient has given consent (and signed a form)
- Yes, other
- No, there is no electronic recording or archiving whatsoever

4.5.1 In case of yes, other, please specify other:

[All further questions in this section are only relevant in case there is electronic patient consent recording (i.e. more than archiving alone)]

4.6 Is consent to care-related procedures (e.g. agreement surgical procedures ...) recorded separately from data processing consent?

- Yes, actually all different types of consent are recorded separately
- Yes, a distinction is made between medical and research related procedures on the one side and data processing consent on the other

- No

4.7 Is electronic consent handled by an eConsent system that is separate/independent from the IT infrastructure of the hospital information system and/or of the trial?

- Yes
 No

4.8 Does your EHR/EMR access control system enforce the recorded patient consent with respect to data protection?

- Yes
 No

If yes, please give some detail about the EMR/EHR Patient Consent Directives privacy functionality. (Questions 4.10, 4.11, 4.12)

4.9 Consent means “opting-in”, allowing something additional to the standard policy. However, “Consent Directives” can also be specified as rules for restricting use with respect to the standard policy (rather “opting out”). Does your EHR/EMR support recording of patients preferences regarding data sharing that limit sharing with respect to the default access policies?

- Yes
 No

4.10 This question addresses the consent directive specification granularity. With respect to the data that can be referred to in a Patient Consent Directive, a Patient Consent Directive can apply to... (check all that apply)

- All data for a patient that is associated with treatment in a particular department
 All data associated to a particular care episode for a patient
 All data of a patient of which has been attributed a certain confidentiality level in the EMR/EHR
 Specific pre-defined result sets or datasets (e.g. mental health data, HIV results and data, ...)
 Patient Directives always cover the complete medical dataset (all data in the hospital)

4.11 Can a patient express Consent Directives about sharing medical data for care environment (e.g. refuse or enable data sharing outside of the local episode, for example by giving feedback to a general practitioner)

- Yes
- No

4.12 Can a patient express consent about secondary use of his EHR/EMR data in specific research projects?

- Yes
- No

4.13 Can a patient express consent about being contacted for possible inclusion into a clinical trial (i.e. consenting to having his medical data scanned for that purpose)?

- Yes
- No

4.14 Can Patient Consent directives specify “conditions” under which they are valid (e.g. only valid in emergency situations, only for non-commercial research)?

- Yes
- No

4.15 When consent is given by a legal guardian, is his identity recorded and will be identifiable?

- Yes
- No

4.16 Does the system automatically initiate re-consent or remind the physician to initiate re-consent when a minor patient becomes legally adult or even at an earlier age defined before?

- Yes
- No

4.17 Does the system support functionality for consent life-time limiting (other than age-related time-limiting)? (e.g. expiration of consent possibly followed by automated request for re-consent)

- Yes
- No

4.18 Is the system capable of recording that consent has been revoked?

- Yes
- No

4.19 Can a patient easily obtain a (complete) overview of what he has consented to?

- Yes
- No

4.20 If possible, please describe the procedures and ICT technologies that guarantee the secure process of personal data in your institution?

4.21 Please note down any relevant remarks not covered by the above questions:

IT related – Clinical Trial Context

[questions 4.22 to 4.26 relate to the clinical trial context and are to be answered by people involved in development or management of clinical trial IT systems]

4.22 Is there an electronic system to manage consent related documents (information leaflets, templates, ...)?

- Yes, this functionality is provided by the Clinical Trial Data Management System (CTMS) we use
- Yes, we use a generic document management system
- Yes, other

- No

4.22.1 In case of 'yes, other', please specify other:

4.23 Do patients give trial related consent by signing paper forms?

- Yes
 No

4.24 Do you archive signed paper consent forms electronically? (e.g. scanned signed paper forms)

- Patients are not asked to sign paper consent forms
 Yes
 No

4.25 If consent is archived, is that done centrally?

- Yes, in the clinic
 Yes, in the department only
 Yes, nationwide
 No

4.26 Is the patient consent (also) recorded electronically? (if yes, check all that apply)

- Yes, the patient can give consent using an electronic signature
 Yes, the data management application requests the physician to record electronically in the application that the patient has given consent (and signed a form)
 Yes, other
 No, there is no electronic recording or archiving whatsoever

4.26.1 In case of 'yes, other', please specify other:

(All further questions (4.27 – 4.37) in this section are only relevant in case there is electronic patient consent recording (i.e. more than archiving alone))

4.27 Is consent to medical related procedures (e.g. agreement surgical procedures ...) recorded separately from data processing consent?

- Yes, actually all different types of consent are recorded separately
- Yes, a distinction is made between medical and research related procedures on the one side and data processing consent on the other
- No

4.28 Is there an electronic system that provides functionality for managing consent given by individual patients (i.e. more functionality than document management as referred to in 4.22) in a more or less generic way?

- Yes, consent management is provided by the CTMS we use
- Yes, we use an independent system for consent management
- Yes, other
- No

4.28.1 In case of 'yes, other', please specify other:

4.29 Does the consent management system offer an overview of the required and obtained consent(s) for each enrolled patient?

- Yes
- No

4.30 Is the consent management system capable of dealing with trial workflow dependent consent? (e.g. different treatment trajectories might require different consent)

- Yes
- No

4.31 Does the consent management system offer support for obtaining re-consent after a study amendment?

- Yes
- No

4.32 Does the consent management system offer support for initiating a re-consent procedure when the patient becomes legally adult or even at a younger age? (e.g. reminder)

- Yes
- No

4.33 Is the recorded consent “integrated” in the investigator trial workflow? (e.g. data entry is prevented as long as no consent is registered, the investigator is presented with a warning when new consent is needed, etc)

- Yes
- No

4.34 When consent is given by a legal guardian, is his identity recorded and will be identifiable?

- Yes
- No

4.35 Does the system allow consent to be revoked?

- Yes
- No

4.36 Can a patient easily obtain a (complete) overview of the consent he/she has given?

- Yes
- No

4.37 Please note down any relevant remarks not covered by the questions:

5. Legal and ethical issues *[questions to all, if not otherwise specified]*

5.1 Do you have to deal with different legal sources when organizing the consent procedure?

- No -> go to 5.3
- Yes, because different national sources are applicable to my project -> go to 5.2
- Yes, because multi national sources are applicable to my project-> go to 5.2

5.2 Do you use one or more forms to obtain consent?

- [] yes
- [] no

5.2.1 If you use several, how many then: []

5.3 European regulations require for different types of consent. At least three of them might be relevant: the patient’s consent to treatment, consent to participate in a clinical trial and consent to allow the processing of personal data. Are you aware that by law you might be required to acquire three separate types of consent?

- Yes, I am aware of these regulations and my institution fulfills these requirements
- Yes, I am aware of these regulations but my institution does not fulfill these requirements
- No, I am not aware of these regulations

5.4 Are there any specific data security or data protection policies concerning patients’ data at your institution?

- Yes
- I am not aware of any
- No

5.5 Does your institution have a Data Protection Officer (a person in charge of monitoring data protection issues in your institution)?

- Yes
- No
- I do not know

5.5 In case of clinical trial with participating centres outside of your country do you then also apply foreign legislation to your consent?

- Yes
- No

5.7 To what extent have you experienced difficulties within European projects arising from differing national implementations of EU legislation?



5.8 Has this had a negative impact on your project / research?

- Yes
- No

5.8.1 If yes, what are the difficulties have caused negative impact?

5.8.2 If yes, would a harmonized one-for-all approach help you in your research?



5.9 Does your organization conduct retrospective studies?

- Yes
- No

5.9.1 If yes, how is consent regulated in these cases?

- Only data of patients who previously consented to additional studies is admitted to the study
- Former patients are asked for consent for the use of the data which was previously collected
- All the previously collected data is being used for the study and additional consent of the data subject is not sought

5.10 In case of vulnerable patients (i.e. subjects possibly not capable of giving legally valid informed consent, such as minors) which of the following is fulfilled:

- A legal representative needs to sign the consent form;
- A vulnerable patient needs to assent
- Any other specific measures, please describe?

5.11 Are there any measures taken to measure the vulnerable patient’s capability to understand the implications of the assent given?

- Yes
- No

5.12 In case of conflict between the consent of the legal representative and assent of the vulnerable patient what further steps are taken?

- The opinion of the legal representative is binding
- Vulnerable patient is not admitted to the trial
- A ruling of the court is needed,
- Other
- Such a situation has never occurred in my practice

5.12.1 In case of ‘other’, please specify other:

5.13 Do you also perform trials on healthy children?

- Yes
- No

5.13.1 If yes, what is the procedure of obtaining consent and assent in the case of healthy children?

5.14 Do you also perform trials on mentally ill patients?

- Yes
- No

5.14.1 If yes, what is the procedure of obtaining consent and assent in the case of mentally ill patients?

5.15 Are there any additional good practices, or guidelines you follow in drafting your consent forms?

- Yes
- No

5.15.1 If yes, please provide a link or upload the guidelines here:

[questions to all]

5.16 Should consent be negotiable or predetermined by one side?

- Negotiable
- Predetermined

5.17 How long do you store the consent forms?

until the end of the trial / project 0  indefinite +5

5.18 Is this legally required or is this done for other reasons?

- Legally required
- I do not know
- Other reasons:

5.18a In case of 'other reasons', please specify reasons:

5.19 Are you required to obtain accreditation of a governmental or non-governmental institution for your consent forms and procedures?

- Yes
- No

5.19.1 If yes, by what institution?

5.19.2 If yes, can you please describe the accreditation procedure?

5.20 Do the consent forms require approval by an ethics committee?

- Yes, by my local ethical committee
- Yes, by my local and other national ethical committees
- No

5.21 Do any additional institutions review your consent forms?

- Yes
- No

5.23.1 If yes, please name the institutions

5.22 Do you inform patients about the rights they have concerning informed consent?

- | | | |
|---|------------------------------|-----------------------------|
| Their rights as a patient | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Their rights as a clinical trials subject | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Their rights as a data subject | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

How do you provide this information?

- 5.23 Do you direct the patient to a non-involved institute/specialist to explain the dangers and aims of the therapy /study?** Yes
- No

5.24 Can the data subject/patient access their personal data after signing the consent form?

- Yes
- No

5.24.1 If yes, how is this organized? e.g. direct or indirect access, on paper or electronically?

5.25 Do you share non-personal data about trial participants with other institutions?

- | | | |
|---------------------------|------------------------------|-----------------------------|
| in the same country | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| abroad, within Europe | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| abroad, outside of Europe | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

5.25.1 If yes, is the participant informed about this?

- Yes
- No

5.26 Do you create the same level of data security for collected information in all your trial centres?

- Yes
- No

5.27 Are you aware of any legal complaints in your professional or personal environment due to the possible inappropriate handling of consent?

- Yes
- No

5.27.1 If yes, what legal actions were taken?

- Alternative dispute resolution /Mediation
- Other complaint procedure
- Lawsuit against the hospital or clinician

[The next questions are only for the National data authorities]**5.28 Does your institution have a unit which provides specific legal support concerning:**

- | | | |
|------------------------------|------------------------------|-----------------------------|
| medical law | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| scientific research, patents | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| clinical trials | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

5.29 Does your institution offer advice about obtaining valid informed consent?

- Yes
- No

5.29.1 If yes, does it offer specific advice for medical data?

- Yes
- No**

5.29.2 If yes, please describe what kind of advice and in what form it is offered

- | | | |
|--------|------------------------------|-----------------------------|
| Online | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|--------|------------------------------|-----------------------------|

- Phone [] Yes [] No
- Mail [] Yes [] No
- eye to eye [] Yes [] No
- flyers [] Yes [] No
- guidelines [] Yes [] No
- Others [] Yes [] No

5.29.2.1 In case of 'Others', please specify:

5.29.3 If you offer such advice: is there an interest from the clinical trials organizers in it?

- Yes
- No

5.30 Does your institution have any procedure of control (audit) over the collection of consent and corresponding data?

- Yes
- No

5.31 Is there a procedure for data subjects to submit a complaint?

- Yes
- No

5.31.1 If yes, are clinical trials included in such a procedure?

- Yes
- No

5.31.2 If yes, how is such a complaint handled?

6. Handling [questions to all]

6.1 Should the consent process be paper based?

- Yes
- No

6.2 Should the consent form be signed electronically?

- Yes
- No

6.2.1 If yes, how many patients will be able to give consent electronically?



6.3 Should there always be an alternative between paper based and electronic consent

- Yes
- No

6.4 How should a patient be able to withdraw consent?

- Electronically, via Web []
- Only by telling the treating physician []
- By writing to the treating physician []
- Other way []

[The next questions are only for chairpersons of trials and coordinators of projects]

6.5 Do you use paper based consent forms or electronic means? paper based only []

- Paper based, but they are later stored electronically []
- Electronic means only []

6.6 Should an electronic consent form be based on modules, so that a specific template can be build?

- Yes**
- No**

6.6.1 If yes, what kind of consent modules would be needed:

- for care
- for trial
- for research
- for biobanking
- for data storage
- for data transfer
- for other

6.6.1.1 In case of 'other', please specify other:

Contact Details:

Prof. Dr. Nikolaus Forgó,

Gottfried Wilhelm Leibniz Universität Hannover, Institut für Rechtsinformatik, Raum Nr.: II/839

Königsworther Platz 1

30167 Hannover

Germany

nikolaus.forgo@iri.uni-hannover.de