

Dermatology Professionals, LLC

Notice of Your Right to Decline Participation in Future Anonymous or Coded Genetic Research

The State of Oregon has laws to protect your genetic privacy. Laws that give you the right to decline to have your health information or biological samples used for research. A biological sample may include urine, blood, or other samples collected from your body. You can decide whether to allow your biological samples or health information to be made available for genetic research. This research can give us information on how to improve or prevent diabetes, cancer, and other diseases. Oregon law governs this research, so that a qualified team reviews all genetic research before it begins, making sure the benefits are greater than any risks to participants.

Your identity is protected in both types of research. In anonymous research, personal information that could be used to identify you, like your name or social security number, cannot be linked to your health information or biological sample. In coded research, personal information that could be used to identify you is kept separate from your health information to your health information or biological sample.

- If you want to allow your health information and biological sample to be available for anonymous or coded genetic research, check the allow box. If you make this choice, your health information or biological sample may be used for anonymous or coded genetic research without further notice to you.
- If you want to decline to have your health information and biological sample available for anonymous or coded genetic research, check the decline box.

Your decision is effective on the date your health care provider receives this form. Your decision will not affect the care you receive from your health care provider or your health insurance coverage.

Whatever you decide now can always be changed in the future. If you change your mind, the new decision will apply to health information or biological samples collected after your health care provider receives written notice of your decision.

If you have any questions or concerns, please contact:
Veronica Roberts, Office Manager at 503-344-6643 Extension: 105

- I allow my health information and biological samples to be available for anonymous or coded genetic research.
- I decline to have my health information and biological samples available for anonymous or coded genetic research.

_____ **Patient's Initials**