

Sample Guidance for documenting Participant Withdrawal: to be completed by Study Staff Only

Instructions: this sample form can be modified with appropriate study-specific options for documentation of the participant's agreement/non agreement to continue with specified study activities post withdrawal. Please review the consent document to ensure that options provided in the consent, for ongoing data collection, are included below. Modify the information below as applicable.

The participant may be asked to respond to these options at the time of withdrawal if applicable. (Note: participant withdrawal in writing, and a reason for withdrawal are not required as per ethics criteria)

Study: _____

Participant Study ID: _____

Consent Form type (e.g., main, optional) and REB approved version date:

Options to review with the participant at the time of withdrawal.

Check all that are applicable:

- complete withdrawal of consent for all further study-related activities, including additional data collection from all sources, and disclosure.
- withdraw from study treatment; continue with protocol required follow-up evaluations and data collection. (as indicated in the consent)
- withdraw from study treatment and from all protocol required follow-up evaluations; but consent to the collection of follow-up data [from medical records, and public records or registries] including survival status.
- Samples:** If the consent/optional consent permits the following, document any request to return and/or to destroy any already collected samples (if applicable) and to request that no further analysis be completed. (if applicable)
- request return/destruction of stored samples and that no further analysis be completed.

Signature of Study Staff

Printed Name

Date of Signature