

Istituti
Ortopedici
Rizzoli

IOR

ISTITUTO DI RICOVERO E CURA A CARATTERE SCIENTIFICO DI DIRITTO PUBBLICO
DECRETO INTERMINISTERIALE 24 GIUGNO 198
ISTITUTO ORTOPEDICO RIZZOLI - ISTITUTO DI RICERCA CODIVILA-PUTTI
CODICE FISCALE e PARTITA I.V.A. 00302030374

Direzione Sanitaria

Via Pupilli, 1 40136 BOLOGNA
Tel. 051 6366227 Fax 051 6366424

**DECLARATION OF AGREEMENT/DISAGREEMENT TO THE USE OF DIAGNOSTIC
MATERIAL FOR RESEARCH PURPOSES**

I, the undersigned _____

aware that I am to undergo diagnostic tests and/or treatment at Istituti Ortopedici Rizzoli, which is a hospital and national research center,

hereby

agree ?

disagree ?

to the use of material obtained for diagnostic and biological purposes during treatment carried out at this research institute.

In accordance with law 196 dated 30.06.2003 concerning the use of personal information, I have been informed that my personal information will be collected and filed electronically. Access to this information will be protected by the head of the ward Dr./Prof. _____. Regulatory authorities and medical staff authorized to monitor and test procedures may inspect the file, on the understanding that it will not be possible to trace my personal identity. By signing the informed consent form, I agree to the access of this information.

The results of any studies may be used for scientific publication, without being able to trace the identity of individual patients.

Any study that uses material obtained must be first approved by the Scientific Technical Committee of the hospital and the Ethics Committee.

This agreement does not authorize genetic and/or molecular studies to be carried out that may specifically identify the patient; such studies require specific consent.

I also declare that Dr _____, who supplied me with this form, has given me ample explanation about the test to be carried out, which is in any case part of the normal diagnostic and therapeutic procedure for the disease for which I have been admitted to hospital.

I also declare that I have discussed these explanations, asked all the questions I deemed necessary and have had satisfactory answers, and I have been able to confer with a person of my choice.

Date _____ SIGNED _____