

Informed Consent Form

Infections in migrants: the importance of malaria and other parasites

2020-10-27

# Consent form

## **Informed consent for participation in the study:**

### **Infections in migrants - the importance of malaria and other parasites**

To be signed before inclusion in the study.

I hereby certify that I have been informed about the study and given written information.

I am willing to participate in the study and I have understood that my participation is voluntary and that I can end my participation at any point without explanation.

I approve

*that* the blood samples collected from me will be stored in Stockholm Medical Biobank according to the biobanking regulations

*that* the blood samples collected from me will be used in analyses described in the study information

*that* I at any point can withdraw my consent and that I can demand that my blood samples will be destroyed or anonymized

*that* the blood samples can be used in future biomedical research that is not described only after ethical approval from the Regional Committee for Research Ethics

*that* my personal data are registered in accordance with the General Data Protection Regulation (GDPR).

**Date** \_\_\_\_\_

**Name** \_\_\_\_\_

**Personal identification number** \_\_\_\_\_

**Signature** \_\_\_\_\_

For children younger than 15 years

**Guardians name** \_\_\_\_\_

**Guardian's signature** \_\_\_\_\_

This document is made in 2 originals, one is to be kept by the volunteering study participant and the other by the researcher.