

Data Consent form - Research Purposes

I acknowledge that my Personal (Health) Data and remaining sample could contribute to further research, development, and enhancement of diagnostic techniques and potential therapeutic remedies. I consent to The BioArte's storage once pseudo anonymized, of:

- My Personal (Health) Data and analytical results.
- Both original and processed sample

and that it will be kept by The BioArte for a minimum period of 10 years.

The company will use this data, along with the remaining samples that have been pseudonymized, for scientific research (both internal and external) as well as commercial research in the field of human related microbiome. The aim of the is to gain a better understanding of the role microbiome in an individual's overall health and susceptibility to diseases, as well as their potential response to treatments. Consent can be revoked at any time as explained below.

Public and private healthcare institutions, bio-medical companies worldwide, can be granted access to the patient's pseudonymized data for research purposes, with the relevant guarantees adopted to ensure legitimacy of the data transfer (especially if the recipient is in a non-EEA country).

Please visit <http://www.bioarte.com> or contact gdpr@bioarte.com for updated information on the research projects in which your pseudonymised data may be used.

Please visit <https://thebioarte.com/data-privacy> to consult our data privacy policy.

HAVING READ AND UNDERSTOOD THE INFORMATION ABOVE, I CONFIRM THAT:

- i. I have read and understood the indication, purpose, characteristics, scope, procedure, success rate, complications, limitations, and economic cost of this test, and have had the opportunity to ask questions and any questions that I had were answered fully and to my satisfaction. I have also been given information on the implications of the test results, any possible follow up and where applicable, any further tests that might be required. I am aware that clinical and technical staff will be at my disposal for any questions or additional counselling that I may require once the results of the test are known.
- ii. I understand that the results of this test are not a substitute to a medical diagnosis performed in a clinical setting provided by a healthcare professional. I accept that The BioArte does not take responsibility for the use, by me or my clinician, of the results obtained and any consequences of such use.
- iii. I confirm that the information I have given, both personal and medical, is accurate and truthful. I acknowledge that the clinical team may reach out to me for additional clinical information, which may include details required for research purposes.
- iv. In view of the complexity of the tests, results should be assessed alongside other clinical information by healthcare professionals. Consequently, I agree that the test report may be forwarded to the requesting clinician so that I can be offered the most appropriate advice.
- v. I am not receiving any compensation as the participant nor will I be owed any funds, at this moment or in the future, due to any invention(s) resulting from research and development using my specimen(s)
- vi. I understand that the results of this study may be used for medical or scientific purposes, may be presented, for example, at meetings, in scientific publications, and that they may be

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reported or published; however, I shall not be personally identified in any way, either individually or collectively.

vii. I have been informed that that this informed consent can be withdrawn at any time.

I accept

I do not accept

Name _____ Surname _____

Signature _____