Informed Consent for Research Study – Non-Interventional Studies

Study Title	:	**Atypical hemolytic-uremic syndrome due to complement factor I mutation**
Principal Investigator	:	**Dr. Abdullah Hashim Almalki**

1. Study Purpose:
You are being invited to take part voluntarily in a research study, the purpose of this project is to *describe the clinical presentation and course of management of atypical hemolytic uremic syndrome.*

2. Duration of Participation:
No interview or interventions will be required. Only clinical data will be collected and reported.

3. Number of Subjects participating/ study Area and settings:
This is a case report describing clinical data from a single patient.

4. Risks and inconveniences:
The research is a case report that requires only collection of clinical data. No extra-visits, No new laboratory extractions or other interventions.

5. Costs and compensation for participation in this study:
You will not receive any compensation for your participation in this study, you will not be asked to pay for any procedure, drug, and laboratory test related to the study.

6. Benefits:
I know that there will be no direct benefit for me or my relatives from participation in this study but it may help in improvement of knowledge or medical science progress.

7. Information about participation:
Your participation in this study is totally voluntary, you have the right to withdraw at any time you want without mentioning the reasons. If you do not want to take part, your decision about the study will not affect your current or future medical care.
The study doctor and the study sponsor have the right to withdraw you from the study if they decide that it's better for your medical condition.

8. Confidentiality and Authorization to collect, use and disclose Personal Medical Information:
All information related to you including personal and medical data provided and collected by the study doctor or coordinator and recorded in the study records will be handled as confidential and no one except authorized research team can have access to records.

9. Communication:
In case of any research related inquiries or medical care during study, or any injuries/ emergency cases feel free to contact the study principal investigator *Dr. Abdullah Almalki, through the contact number 012 226 6666 Extension 24306.*

I've been given the opportunity to discuss my questions about participating in this study and the research team has answered all my questions, if I have any further questions I will call *Dr. Abdullah Almalki.*

By signing this informed consent form I acknowledged that I did not give up any of my legal rights, also I confirm that I have received a sufficient information about the study and that I have read and understood the information in this informed consent form and I have had the opportunity to discuss the study and ask questions and have been satisfied with the received explanations.

I understand that after signing this informed consent form I will receive a signed and dated copy.

By signing and dating this informed consent form, I agree to participate in this research study.

Thuraya Khan ثريا خان **Subject Name**	ثريا **Signature**	20/01/2017 **Date**
Mohammad Azfar Qureshi **Name of the witness** Type if the subject agrees verbally and he/she is illiterate	 **Signature**	20/01/17 **Date**
Abdullah Alwahbi **Name of the Principal Investigator or Study Coordinator**	 **Signature**	20/01/2017 **Date**