



Health in Our Hands Patient Network Consent Form
From the Louisiana Clinical Data Research Network (LaCDRN)

We'd like you to be part of a new Patient Network called "Health in Our Hands." Through this Network, you will work with researchers and providers to give and get information. There is **no** health risk to take part in Health in Our Hands.

What is Health in Our Hands?

Health in Our Hands is a Patient Network that sees patients as the experts. It gives you the chance to share what is important to you and your health. We want to learn from **you**, the patient. We will also send you up-to-date news and resources related to your health.

What happens when I join Health in Our Hands?

1. We may ask you to answer surveys about your health and daily life. We will link the answers you give us to your health treatment record. This will give providers and researchers a more complete picture of your health. There are **no** right or wrong answers to the questions. You can skip any question you don't want to answer.
2. We may contact you by phone, text, email, or paper mail in the future:
 - To answer surveys about your health and daily life.
 - To tell you about studies that you might be able to join.
 - To share information with you, like health tips and research results.

Who will see my information?

Only your providers and authorized researchers and staff can see your information. We will use strict privacy protections to keep your information private and secure. **Your contact information will never be shared or sold.**

Joining Health in Our Hands is up to you. If you choose **not** to join, it **won't** affect your health care. And we may still ask you to help with other research. If you do join, you can leave the Network at any time. Just contact us at 1-855-997-4464 or info@hioh.org. If you leave the Health in Our Hands Network, we will keep and use any information you already gave us.

How do I join?

Please check the box below to join the Health in Our Hands Patient Network:

I agree to enroll in the Health in Our Hands Patient Network. I understand that you may ask me more questions after today. I also understand that you may send me information you think is important to me.