**INFORMED CONSENT FORM (ICF)**

**Study Title:** Effectiveness and Safety of Septum-guided Segmentectomy in Solid-dominant, Deep-seated Early-stage Non-small Cell Lung Cancer (≤2 cm): A Single-center, Prospective, Single-arm Clinical Trial (SGS2512)

**Protocol Number:** SGS2512

**Sponsor:** Shanghai Chest Hospital

**Principal Investigator:** Prof. Junfeng Geng, MD, PhD

**Version/Date:** V1.1 / April 13, 2026

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## 1. STUDY BACKGROUND AND PURPOSE

You are invited to participate in the "SGS2512" study because you have been diagnosed with early-stage non-small cell lung cancer (NSCLC) with a tumor (≤2 cm) located in the deep part of the lung (inner 2/3).

The standard treatment is "Lobectomy," which involves removing a large portion of the lung. "Segmentectomy" is an alternative that preserves more lung function. This study evaluates **"Septum-guided Segmentectomy" (SGS)**, which uses natural anatomical membranes (septa) as boundaries to achieve a more precise and safer resection for deep tumors.

## 2. STUDY PROCEDURES

If you decide to participate, you will undergo:

- **Preoperative Assessment:** Routine CT, PET-CT, and pulmonary function tests.
- **Surgery:** Septum-guided Segmentectomy performed via VATS or Robot-assisted surgery.
- **Intraoperative Quality Control:** If the surgeon finds that the tumor is not suitable for segmentectomy (e.g., lymph node metastasis), the procedure will be converted to a standard lobectomy for your safety.
- **Follow-up:** Regular check-ups at 1, 6, 12, 18, 24, 30, and 36 months after surgery.

## 3. POTENTIAL RISKS AND DISCOMFORTS

The risks are similar to standard lung surgery, including:

- **Surgical Risks:** Bleeding, infection, air leak, pneumonia, or arrhythmia.
- **Oncological Risks:** Potential for local recurrence or metastasis.
- **Anesthesia Risks:** Allergic reactions or other complications.
- **Radiation:** Minimal exposure from follow-up CT scans. An independent **Data Safety Monitoring Board (DSMB)** will oversee the study to maximize your safety.

## 4. POTENTIAL BENEFITS

- **Lung Function Preservation:** Potential to save more healthy lung tissue compared to lobectomy.
- **Close Monitoring:** Systematic follow-up by a specialized medical team.
- **Scientific Contribution:** Your participation will provide evidence for treating deep-seated lung cancer.

## 5. VOLUNTARY PARTICIPATION AND WITHDRAWAL

Participation is entirely voluntary. You may choose to withdraw at any time without any penalty or loss of medical benefits to which you are otherwise entitled.

## 6. CONFIDENTIALITY

Your personal identity and medical records will be kept strictly confidential. Research data will be coded (de-identified). Authorized representatives from the ethics committee or regulatory agencies may review your records for auditing purposes.

## 7. CONTACT INFORMATION

If you have any questions or experience any study-related injuries, please contact:

- **Principal Investigator:** Prof. Junfeng Geng
- **Affiliation:** Department of Thoracic Surgery, Shanghai Chest Hospital

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## STATEMENT OF CONSENT

I have read this informed consent form (or had it read to me). I have had the opportunity to ask questions and all my questions have been answered to my satisfaction. I voluntarily agree to participate in this study.

**Participant's Name (Printed):** _____ **Participant's Signature:** _____ **Date:** _____

Researcher's Name (Printed): _____ Researcher's Signature: _____ Date: _____