ENDOPOL Study

ENDOPOL: dye chromoENDOscopy versus virtual chromoendoscopy for assessment of the ileo-anal pouch in patients with familial adenomatous POLyposis: a randomized controlled trial

Consent Form Version 1

IRAS project ID:	365649
Protocol number:	RD25/099
REC reference:	26/EM/0070
Sponsor:	London North West University Healthcare NHS Trust
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Northwick Park Hospital,
Watford Road,
Harrow, Middlesex.
HA1 3UJ

PATIENT CONSENT FORM:

Dye Chromoendoscopy vs. Virtual Chromoendoscopy for the evaluation of the ileo-anal pouch in patients with Familial Adenomatous Polyposis: A Randomized Controlled Study

PATIENT ID:

I……confirm that:

1. I agree to participate in this study
2. I have read and understood the patient information leaflet regarding this study
3. I understand that my endoscopy monitoring data will be collected and analysed
4. I understand that my endoscopy data will be anonymised before they leave the St Mark's hospital and that no personal details will be transferred outside of the St Mark's hospital
5. Only staff working in the polyposis registry will access my medical records in relation to this study
6. I understand that I may withdraw from this study at anytime
7. I have had the opportunity to ask any questions related to this study and have had them answered satisfactorily
8.

I give permission to store my data for use in other research as mentioned in the information letter	Yes ☐	No☐
I give permission to be approached for potential participation in follow-up research after this study	Yes ☐	No☐

PATIENT NAME: …… SIGNATURE …… DATE ……

NAME TAKING CONSENT…… SIGNATURE …… DATE ……

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3 copies to be taken: Copy 1 for participant, copy 2 for medical notes, copy 3 for research file.