Informed consent form

This informed consent form provides an overview of the risk score tests and describes the purposes, benefits, and limitations of the tests. Please read the information carefully before providing your consent for the testing. Taking the test is voluntary.

I,_____
(FIRST NAME and FAMILY NAME in capital letters), request and permit Antegenes to analyse my DNA and other personal information to perform the service:

Please tick the correct box for the service required.

☐ **Breast cancer** (AnteBC) – Women only

☐ **Prostate cancer** (AntePC) – Men only

☐ **Colorectal cancer** (AnteCRC)

☐ **Melanoma** (AnteMEL)

☐ **Set of tests for women**: breast, colorectal cancer and melanoma (AnteCancerW)

☐ **Set of tests for men**: prostate, colorectal cancer and melanoma (AnteCancerM)

I UNDERSTAND THAT:

1. Breast cancer, prostate cancer, colorectal cancer and melanoma risk score tests are genetic tests that assess my personal cancer risk based on polygenic risk scores.
2. The purpose of these tests is to reduce the risk of premature cancer mortality through advanced screening and other prevention measures.
3. These tests cannot be used to diagnose breast, prostate, colorectal cancer or melanoma.
4. A higher risk estimate does not mean that you will develop any of the tested cancer types during your lifetime. In addition, a lower risk does also not mean that the probability of developing the disease is zero.
5. The tests do not directly assess the risk of your family and relatives, i.e. polygenic risk score-based disease risks do not transfer directly from parents to children.
6. The saliva sample is necessary to collect and extract my DNA to perform the analysis.
7. My sample is transmitted to the laboratory as pseudonymised (i.e., samples are labeled only with a unique code precluding direct identity identification). The genetic material is analysed using second-generation genotyping and carried out in an ISO:17025 accredited Eurofins Genomics laboratory.
8. The tests have been developed and will be processed by OÜ Antegenes and their authorised service processors in accordance with all applicable laws and regulations.
9. My personal data will be processed in accordance with all the regulatory requirements in effect. Detailed processing principles are defined in the terms of service and privacy policy of Antegenes.

10. I agree to Antegenes terms and conditions of the service (https://antegenes.com/legal/terms-and-conditions/).
11. I acknowledge that I have read, understand and agreed Antegenes' Privacy Policy (https://antegenes.com/legal/privacy-statement/).
12. I will be opening an account in the Information System of Antegenes as part of the service.
13. I authorise my test results to be disclosed to Everything Genetic and their authorised representatives.
14. Antegenes is not responsible for any misinterpretation of the results by the patient or further action by the physician chosen by the patient.
15. I have the right to receive a copy of this consent form.
16. The risk score tests have following limitations:
    - The risk score tests do not analyse rare pathogenic mutations in single genes predisposed to breast, prostate, colorectal cancer and melanoma that significantly increase the risk of developing the cancers.
    - The risk score tests are based on the most up-to-date scientific data, which may, however, be supplemented and changed in the future as additional information becomes available. The field of genetics is constantly evolving, which may lead to changes in risk assessments over time, as well as changes in test selection recommendations and clinical recommendations based on test results.
    - Different polygenic risk scores predicting risks of the same trait may give different estimates of the individual's risks due to differences in the genetic variants included in the models and their weights.
    - The results of this test should be applied in context with other relevant clinical data. In addition to the possible genetic predisposition, other risk factors also influence the risk of breast, prostate, colorectal cancer and melanoma.

BY SIGNING BELOW, I AGREE TO THE FOLLOWING:
I have read, understood and agreed to the information provided on this form and have had an opportunity to have any questions answered by my service provider or Everything Genetic (+44 (0) 1270 623 179 or customercare@everythinggeneticltd.co.uk).

Patient name (please print)

Sample date (DD/MM/YYYY)

Your signature