



## Australian Health Survey 2011-13

### Consent for Biomedical sample collection - Adults and young persons

Thank you for participating in the Australian Health Survey. This form seeks your consent to participate in the voluntary biomedical sample collection component of the survey.

By completing the reverse side of this consent form you are **acknowledging** that:

- Participation in this part of the survey involves providing small samples of blood and urine - these are known as 'biomedical samples'.
- The biomedical samples will be collected by a qualified health professional.
- The biomedical samples will be tested for indicators of chronic disease (e.g. cardiovascular disease, kidney disease, and diabetes) and nutritional imbalance by trained staff at a pathology laboratory - the results of these tests are called 'pathology test results'.
- A copy of your pathology test results will be sent to the Australian Bureau of Statistics (ABS).
- You can receive a copy of your pathology test results and you may nominate for your doctor or health care provider to receive a copy of your pathology test results.
- The results do **not provide a diagnosis**. Any health concerns you have, or that may be indicated in your pathology test results, should be discussed with your doctor or health care provider.

#### Confidentiality

The confidentiality of your information and pathology test results, held by the pathology provider collecting biomedical samples and performing tests on the collected samples, is protected under the *Privacy Act 1988*. With your consent the pathology provider will give the ABS access to these results in accordance with the *Guidelines on Privacy in the Private Health Sector*. The ABS is required by the *Census and Statistics Act 1905* to maintain the secrecy of all information provided to us. No information provided to the ABS will be released in a way that would enable an individual or household to be identified (including to any organisation or government department).

#### Help available

If you have problems completing this form, any concerns, or would like a replacement form please contact the Australian Bureau of Statistics on **1800 904 314** Freecall (excluding mobile phones).

Brian Pink  
Australian Statistician



**Consent form for participation in the Australian Health Survey 2011-13**  
**ADULT or YOUNG PERSON (aged 16 years or older)**  
**Biomedical sample collection**

**Important:** Please read the other side of this form before proceeding and please use **only black ball point pen** when completing this form - Thank you.

Name of participant (please use BLOCK letters)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--



**By marking the box marked 'Yes' and signing the form, I am indicating that:**

- I have read and understood the information provided to me on the reverse side of this form and in the Information Sheet; and
- I have been given a copy of the Information Sheet and Consent Form for my records; and
- I understand that I can withdraw my consent up until the time that I have provided samples.

**Yes, I want to participate and I give my consent for the Australian Bureau of Statistics to receive a copy of the pathology test results from analysis of my blood and/or urine sample(s).**

Please use BLOCK letters

Name ... .. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Signature ... 

--

Date ... .. 

/	/	
---	---	--