

**Krebsprädispositionssyndrom-
Register 01**

Registerleitung:

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Information for children 7-11 years of age

Liquid Biopsy as a part of
Cancer-Predisposition-Syndrome-Registry 01

Dear _____,

You already have told us, that you would like to participate in the Registry. You have surely just notice that you and your parents are being asked to participate in another study. This sheet should explain, what this means. You can read everything on your own, think about it and discuss it with your parents and your treating physicians whether you would like to participate.

Your physicians have discovered that you have a rare disease. There are only a few children who have the same disease. We would like to understand your disease better and find out whether we can help people with this disease through certain examinations.

Therefore, we want to examine your blood two times per year. If your blood has to be taken anyway, the blood for this examination can be taken at the same time, so that we have to prick you as rarely as possible.

We would be happy if you would like to participate and help other children as well. But if you don't want to, that is no problem either. Please ask your doctors if you don't understand something. They will gladly help you.

Thank you very much.
Your physician's team