

DKMS

40 Fulton Street 26th Floor New York, NY 10038

T 212.209.6700 info@dkms.org

dkms.org

Thank you for registering to be a blood stem cell donor with DKMS. As a registered donor you agreed to the following terms:

Declaration of Consent for New Blood Stem Cell Donors

- 1. I have read the educational material provided and my questions have been answered satisfactorily.
- 2. According to my knowledge, I meet the eligibility requirements to become a registered bone marrow and peripheral blood stem cell donor.
- 3. I have provided accurate and complete contact information and agree to inform DKMS of any changes.
- 4. I consent to having cheek swabs collected, my tissue and other biological factors typed and tested by DKMS and listed with internal, national, and international registries.
- 5. I authorize DKMS to store my information including contact details, relevant medical history, and the results of the analysis of my sample and to access, process, anonymize, and transfer this data as strictly necessary for conducting the DKMS operations of matching donors and recipients, facilitating bone marrow and peripheral blood stem cell donations, and quality control.
- 6. I authorize DKMS to use my contact information in order to contact me in regard to my registration as a potential bone marrow and peripheral blood stem cell donor and with regard to the latest news, activities, and appeals of DKMS.
- 7. I may withdraw this consent at any time by contacting DKMS by phone at 212-209-6700 or by email at info@dkms.org

Data Protection

When you register as a potential donor, your tissue type and other biological factors are listed on the registries and compared with the tissue types of patients in need of a transplant. If you are identified as a potential donor for a patient, additional testing is required to determine if

you and the patient are a close enough match for a transplant. If you are determined to be the best available match, you may be asked to donate bone marrow or peripheral blood stem cells.

By signing this form, you are registering as a potential bone marrow and peripheral blood stem cell donor. You are also giving DKMS the permission to:

- i) collect, retain and use your personal identifying information and your contact information for the purpose of contacting you regarding your participation as a potential donor, as well as marketing, fundraising and volunteer-related initiatives conducted directly or through partners.
- (ii) share and store such information amongst the DKMS group, some of which may be located internationally.

You will be listed anonymously on internal, national, and international donor registries, accessible for patients worldwide. Your name will not be revealed on the registries; only information necessary to perform the unrelated donor search will be revealed.

You are further giving DKMS permission to collect cheek cells from the inside of your mouth using cotton-tipped swabs to determine your tissue type as well as other biological factors that are important for donation; to store your cheek swab samples for as long as further testing may be needed; and to conduct further testing of your sample to determine if you match a searching patient. Anonymized data may be used in the framework of scientific analyses and research aimed at improving the treatment of patients within international organizations of the DKMS group. These activities will be carried out at partner laboratories of DKMS, some of which may be located internationally.

The chance that you will be selected to donate depends on your tissue type. It is rare to find matching donors, so there is a chance you may never be matched at all. Your participation continues until your 61st birthday unless you ask to be removed or it is determined you are no longer eligible.

Confidentiality

DKMS has put procedures in place to keep your personal information and donor status private and confidential. Your personal identifying information will not be disclosed to the donor registries or transplant centers. If you are selected as a potential matching donor for a searching patient, your personal identifying information and contact information will be used in attempting to locate you. We will only use your data in accordance with your consent, or as strictly mandated by law or good clinical practice. We will never sell your data

Please keep a copy of this consent form for your records.