

Opt-Out Statement for Non-Interventional Study

Study Title:

â€œObservational Study on Health Patterns in Adult Populationâ€

Institution:

XYZ Medical Research Center

Background:

This study is non-interventional and observational in nature. Information routinely collected as part of your care may be used to help improve understanding of health trends. No additional tests, treatments, or interventions are required for this study.

Opt-Out Information:

You have the right to opt-out and request that your information not be used for the study. Choosing to opt-out will not affect the quality of care you receive.

If you wish to opt-out, please complete the following statement and return it to the reception or study coordinator.

Opt-Out Statement:

I have read the information about the **Non-Interventional Observational Study** and **do not consent** to the use of my medical data for research purposes related to this study.

Name: _____

Signature: _____

Date: _____

Important Notes:

- Opting out will not impact the care or services you receive from our facility.
- Only routinely collected data is used; no experimental procedures are involved.
- This form is for non-interventional, observational studies only.
- You may withdraw your opt-out decision at any time by contacting the study team.