

RECOVERY TRIAL – INFORMED CONSENT FORM



Hospital Name: (use CAPITALS)			
Patient Name: (use CAPITALS)			
Study ID: (enter after randomisation)			
me) and understood t	the Participant Infor	provided to me: I confirm that I mation Leaflet (V26.0 13-Sep-2 d ask questions. These have bee	2023) and I have had the
		hat my participation is volunta eason, and without my medica	-
information collected d	uring the study to be	permission for relevant sections e looked at, in confidence, by a gulatory authorities to check tha	uthorised individuals from
hospitals which provide organizations (including to the study coordinating that information that ide	me with care and what hospital admission, on gentre both during entifies me will be pa	ee that medical information conich may be located in local or nacivil registration, audit and resease and for up to 10 years after reseased securely to such bodies to the coordinating centre team.	ational health and research arch data) may be provided my discharge. I understand
recorded on a compute	er database, and that	that information about my pro t this data will be stored on co nformation will be kept securely	mputers supervised by the
6. GP: I understand that RECOVERY trial.	my GP may be infor	med of any issues relevant to m	y participation in the
		and nasal/mouth swabs may be	
8. Agreement to take p ask questions and agree		information (or had it read to r bove study.	ne), had an opportunity to
PRINTED name of partici		Signature	// Today's date
			/

*1 copy for participant; 1 copy for researcher site file; 1 (original) to be kept in medical notes

Signature

PRINTED name of person taking consent

Today's date



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Hospital Name: (use CAPITALS)		
Patient Name: (use CAPITALS)		
,		
Study ID:		
(enter after randomisation)		
f participant is not able to read the text and/or	sign for themselves but has cap	acity to give consent
witnessed accurate reading of the consent form satisfactory replies.	to the potential participant, who	o could ask any questions and got
confirm that they gave their consent freely.		
		//
PRINTED name of witness	Signature	Today's date
		/
PRINTED name of person taking consent	Signature	Today's date
f participant lacks capacity to give consent due railure or need for immediate ventilation) or pri		al condition (e.g. acute respirator
have read the information (or had it read to me	and had an opportunity to ask o	questions.
have no other involvement in the RECOVERY tria	al.	
understand that the patient will be informed ab	out the trial as soon as they have	e the capacity to do so and that if
hey wish, they will be able to withdraw from the	•	·
I believe that if they were able to, the patient wo	ould wish to take part in this stud	y.
		/
PRINTED name of Legal Representative	Signature	Today's date
Relationship to participant (or state 'professiona	l' if clinician acting as legal represen	ntative)
		//
PRINTED name of person taking consent	Signature	Todav's date

*1 copy for legal rep; 1 copy for researcher site file; 1 (original) to be kept in participant medical notes



RECXVERY RECOVERY TRIAL – PARTICIPANT INFORMATION SHEET



Invitation to participate

We are inviting people who have been admitted to hospital with pneumonia to consent to join this research study, which is comparing possible treatments. This form gives information about the study including the aims, risks and benefits of taking part.

WHAT YOU SHOULD KNOW ABOUT THIS RESEARCH STUDY:

1) Why is this research being done?

Your doctors have found that you have a lung disease called pneumonia, caused by COVID-19, influenza, or other organisms. COVID-19 is caused by a type of virus called SARS-CoV-2, or coronavirus for short. Influenza pneumonia is caused by a flu virus different to COVID-19. Other types of pneumonia are typically caused by bacteria that live in the throat (this is usually just called 'community-acquired pneumonia'). Most patients who get these infections get better without coming to hospital. Of those who are admitted to hospital, most also get better, but some may need oxygen or mechanical ventilation before they do so. However, a few percent do not get better.

This trial has already shown that low doses of a type of steroid, dexamethasone, and other treatments reduce the risk of dying for some patients hospitalised with COVID-19. There are several other treatments which may turn out to be helpful (or possibly harmful) when used in the treatment of pneumonia caused by COVID-19, influenza or other organisms. This study aims to find out whether any of these additional treatments are helpful.

2) What is the purpose of this study?

This study aims to compare several different treatments that may be useful for patients with pneumonia. Although these treatments show promise, nobody knows if any of them will help patients recover more effectively than the usual standard of care all patients at your hospital will receive.

- The treatments for COVID-19 include a high dose steroid, dexamethasone (if you need help with your breathing), and a synthetic antibody treatment directed against the virus (called sotrovimab).
- The treatments for influenza pneumonia include two anti-viral treatments, oseltamivir and baloxavir, and low-dose dexamethasone.
- The treatment for community-acquired pneumonia is low-dose dexamethasone.

At present, we don't know whether any of these will work. However, the side-effects are already well-known from other uses and so your doctor will be able to monitor you appropriately.

3) Who is doing the study?

The study is being conducted by researchers at the University of Oxford, which acts as the sponsor for the research, working with doctors at many hospitals across the UK.

4) Who is being included in the study?

Patients may be included in this study if they are in hospital and have COVID-19 and/or influenza pneumonia confirmed by a laboratory test, or if their doctor has diagnosed community-acquired pneumonia. Patients will not be included if the attending doctor thinks none of the study treatments are suitable for them. Patients may be included if they have been recruited into RECOVERY >6 months ago (although not into the same comparison more than once).

5) What happens next if I agree to be included in this study?

If you decide to join, you will be asked to sign the consent form. Next, brief details identifying you and answering a few questions about your health and medical conditions will be entered into a computer. If you are a woman of child-bearing potential, you will have a pregnancy test. If you might receive sotrovimab a blood sample will be sent to a central laboratory for measurement of coronavirus and immune responses against it, and a nasal swab may be collected now and twice more in the next 5 days. If you have 'flu a nasal swab may be collected now and once more in 5 days. The results of all these tests will not be available to your medical team because they are for research and are not validated for clinical application, and the samples will be destroyed once testing is complete. If you are discharged before day 5 you may be asked if you would be willing to take a swab sample at home and post it back (free of charge). This is optional.

The computer will then allocate you at random (like rolling a dice) to one (or sometimes more) of the possible treatment options, depending on what illness you have and what your doctors think is suitable. Other than being allocated to receive, or not receive, the study treatment, you will be given the same standard care as if you did not join the study. Neither you nor your doctors can choose which of these treatments you will be allocated. Additional information about your health will be recorded and entered into the study computer. No additional visits will be required after you leave the hospital.

Information about your health (before, during, and after the study) may be obtained from medical records or databases (including NHS England, the UK Health Security Agency, other equivalent bodies, and genetic or other research databases if you have provided samples to them) so that the study team can get more detailed or longer term information about the effects of the study treatments on your health for up to 10 years after your discharge. For pregnant women we will collect your and your baby's outcome from the UK Obstetric Surveillance System. We may write to you to tell you about the trial periodically, but you will be able to opt-out of these communications if you prefer. Your GP may be informed of any issues relevant to your participation in the trial.

6) What are the possible benefits of being in the study?

We do not know if any of the treatments being tested will have additional benefits. Your study treatment may or may not help you personally, but this study should help future patients.

7) What are the possible risks of being in the study?

- Dexamethasone (and other steroids) may disturb sleep and increase the risk of infections. In people with diabetes it can raise blood sugar.
- Oseltamivir may cause headache, tummy upset and allergic reactions.
- Baloxavir rarely causes allergic reactions, but has no other known side effects.
- Sotrovimab is given by intravenous infusion and may cause allergic reactions during the infusion, but severe reactions have been rare.

There is also the unlikely possibility of a severe reaction to any study drug. Please ask your hospital doctor if you would like more information. Once you have been included in the study, you and your doctors will know which treatment the computer has allocated for you. Your doctors will be aware of whether there are any particular side effects that they should look out for.

Women who are pregnant may be included, however, the effect of some of the treatments on unborn babies is uncertain. Steroids and oseltamivir have previously been used in pregnancy for other medical conditions without safety concerns being raised (but because dexamethasone could have effects on the baby, pregnant and breastfeeding women will receive an alternative steroid). Baloxavir and sotrovimab have not been used in pregnant women before but are considered to have an acceptably low level of risk to use in pregnant women in this trial by a national expert panel; your medical team will discuss with you whether you would be willing to receive them.

8) Can I stop the study treatment or my participation early?

If you or your doctor want to stop the study treatment before the course has been completed, then you are free to do so. If you decide that you do not wish any more information to be collected about you, you are free to say so (although de-identified information collected up to that point will continue to be analysed by the research team).

9) If I have any questions or problems, who can I call?

If you have any questions please speak to your hospital medical team. Further information about the study is available on the study website (www.recoverytrial.net).

10) What information do you hold about me and how do you keep it private?

All information about you and your health will be kept private. The only people allowed to look at the information will be the doctors who are running the study, authorised staff at Oxford University and your hospital, and the regulatory authorities who check that the study is being carried out correctly. A privacy notice is on the study website (www.recoverytrial.net/study-faq/data-privacy).

11) Do I have to take part?

Joining the study is voluntary. Your decision whether to take part will not affect the care you receive at this hospital.

12) Are there any financial costs or payments?

All trial treatments will be free. Neither you nor your medical staff will be paid for your participation in this study.

13) What else can you tell me?

The study has been approved by the Medicines and Healthcare products Regulatory Agency (MHRA) and by the Cambridge East Research Ethics Committee (Health Research Authority, ref 20/EE/0101). It is funded by UK Research and Innovation and the National Institute for Health Research, not the makers of any of the study treatments (who may provide the treatment free of charge to the trial). If we find out any new information that might affect your decision to stay in the study, we will give it to you. The University of Oxford, as Sponsor, has appropriate insurance in place in the unlikely event that you suffer any harm as a direct consequence of your participation in this study. NHS indemnity operates in respect of the clinical treatment that is provided.