

[Hospital logo here]

Patient label

Centre:

Date of clinic attendance:

Referral: Self/GP/Consultant/website/other

Private patient: YES/NO

### **BSGE Pelvic Pain Questionnaire – Privacy Notice and Consent Form**

This questionnaire has been designed to help us understand your problems and to find the most appropriate treatments. It may also help you to formulate your thoughts on your symptoms and the way in which they can affect your quality of life. It is important that you answer as many of the questions as you are able. If you find any of them awkward to answer, please leave them blank and we may discuss them at your consultation should you wish.

If you do not understand any of the questions, particularly about previous treatment, please leave these blank and raise the questions when you are seen in the clinic.

BSGE has developed a Database of clinical and surgical information which we hope will make procedures as safe and effective as possible. Hospital Trusts and individual Consultants can use this information to look at their practice and make any necessary changes to improve patient care. The data may also be sent to NHS Digital where it can be linked to other patient events to support outcome assessment. Holding this data nationally will also allow researchers to have access following BSGE and NHS Digital approval. There is a National Opt-Out available to allow you to limit this national use.

The findings and results of any surgical intervention that you may have will be recorded and assessed, as will your responses from follow up questionnaires.

The patient information held in the BSGE database comprises: Date of Birth, Email address, and Hospital Number / NHS number (“Patient Identifiable Data”) together with health, clinical and surgical information. The information on the BSGE database is recorded in line with the General Data Protection Regulation (GDPR) (2018).

The findings and results of any surgical intervention that you may have will be recorded and assessed, as will your responses from follow up questionnaires.

Where your Patient Identifiable Data is used for auditing and direct care purposes, BSGE collects this on the basis of this being necessary to provide a public task. Where your health data is used for auditing and direct care purposes, BSGE collects this on the basis of being necessary for health and social care purposes. This data will be held for a 20-year period.

Where your Patient Identifiable Data and health data is used for research purposes, we would like to request your consent to be included in this national data set. This data will be held for a 20-year period.

Identifiable data will be held by BSGE for a period of 20 years to allow consultants to drive improvements in patient care and identify trends in outcomes. Beyond this point, data will be fully anonymised.

Anonymised information collected on all patients will be used for research and study into the treatment of endometriosis, and may be published in medical journals or presented at medical scientific meetings.

Identifiable and health data will never be used by BSGE to profile you or to make automated decisions about you or your healthcare.

Please confirm whether you agree to each of the following, to allow us to enter your Patient Identifiable Data into the BSGE database for the following purposes:

- The processing of my Patient Identifiable Data and clinical information by BSGE for research purposes as outlined above.
- The disclosure by BSGE of my Patient Identifiable Data and clinical information to its information technology service providers (ICE Support Limited), where such suppliers have agreed to adopt appropriate technical and organisation measures to protect the security of my Patient Identifiable Data and only to process it in accordance with BSGE's instructions.

Please note that you can request access to view your entry on the BSGE database from your consultant team and can request that this is deleted at any time by sending a written notice to your consultant OR to the following address:

Data Protection Officer c/o BSGE, Royal College of Obstetricians & Gynaecologists 10-18, Union Street, London SE1 1SZ.

Please sign below to confirm that you have read and understood this consent form and are happy for the information that you provide to be included on the database. We will be collecting information about you throughout your treatment.

Signature ..... NAME (Print) ..... Date .....

In some cases it is easier to send you follow up questionnaires by email. Don't worry, we will only send emails when you are due a follow up questionnaire, so this will be a maximum of three questionnaires over two years. If you give consent to receive email questionnaires, please complete the details below:

**I consent to email contact.**

Email address: \_\_\_\_\_

Signature .....