



Gemeinschaftspraxis

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3D/4D-Sonographie

Gemeinschaftspraxis

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Consent for genetic diagnosis according to article 8 of the German Genetic Diagnostic Law (§ 8 Gendiagnostikgesetz, GenDG)

I, _____ (name, first name),
born on _____, after sufficient time for consideration, agree to the following
genetic analysis:

_____.

The attending doctor has sufficiently informed me about the scope and significance of the
above-named analysis.

I know that I can withdraw my consent for the above-named analysis at any time in writing or
verbally and that the results of the above-named analysis must be destroyed at my request at
any time.

I consent to the release of the results of the test to the following persons:

- my partner:
- my gynaecologist:
- my family doctor:
- prenatal diagnostician:
- the following other persons:

I consent to my sample being stored longer than the statutory limit for the purpose of verifying
the results and, if necessary, carrying out tests at a later time during pregnancy on myself or my
family.

I consent I do not consent

I consent to anonymised samples being stored for the purpose of carrying out laboratory quality
controls/scientific research.

I consent I do not consent

I consent to my test results being stored longer than the statutory limit for the purpose of
carrying out follow-up tests on my family.

I consent I do not consent

If necessary, my results may be used for counselling/testing my relatives.

I consent I do not consent

(Place, date and signature of the patient)