Age: \_\_\_\_\_\_\_\_\_\_\_ years

Gender:

Do you have a family member who has been diagnosed with pancreatic cancer?

**Yes/No/Prefer not to answer**

*If* ***Yes****:*

What is your relationship with the patient? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please briefly indicate if you are suffering or have suffered from pancreatic cancer or any other diseases of the pancreas, liver, gallbladder or bile duct.

Have you read the research summary provided? **Yes/No**

1. How do you feel about the **use of electronic health records without patient consent** in this research aiming to improve pancreatic cancer management? Do the potential public benefits justify the approach?

Please feel free to use more space as necessary.

1. What are your general concerns about the use of electronic health records in medical research? How do you think those concerns can be addressed?

Please feel free to use more space as necessary.

***Please email your completed form to*** ***d.ullah@qmul.ac.uk***