Partners HealthCare System
Research Consent Form

Subject Identification

General Template
Version Date: February 2010

Protocol Title: Renal Denervation in Patients with Uncontrolled Hypertension - SYMPLICITY HTN-3

Principal Investigator: Mark A. Creager, M.D.

Site Principal Investigator:

Description of Subject Population: Subjects with Uncontrolled Hypertension

About this consent form

Please read this form carefully. It tells you important information about a research study. A member of our research team will also talk to you about taking part in this research study. People who agree to take part in research studies are called "subjects." This term will be used throughout this consent form.

Partners HealthCare System is made up of Partners hospitals, health care providers, and researchers. In the rest of this consent form, we refer to the Partners system simply as "Partners."

If you have any questions about the research or about this form, please ask us. Taking part in this research study is up to you. If you decide to take part in this research study, you must sign this form to show that you want to take part. We will give you a signed copy of this form to keep.

A description of this clinical trial will be available on http://www.ClinicalTrials.gov, as required by U.S. Law. This Web site will not include information that can identify you. At most, the Website will include a summary of the results. You can search this Web site at anytime.

Why is this research study being done?

Hypertension (high blood pressure) is a major and growing public health concern. An estimated 30-40 out of every 100 adults in the developed world suffers from hypertension. Despite the availability of many safe and helpful therapies, the number of people that have adequate blood pressure control (according to the guideline target blood pressure values) remains low. This leaves people with uncontrolled hypertension at an increased cardiovascular (heart and blood vessel) risk. Thus, the development of new approaches for the management of hypertension is a priority.

The kidneys are an important regulator of blood pressure. Earlier research has shown that disrupting the nerves of the kidney may successfully decrease blood pressure. In the past, one technique that was used to treat severe high blood pressure was a surgical procedure to cut these nerves. However, this surgery is no longer commonly performed.

Another less invasive approach to disrupting these nerves is to apply a brief high temperature near the nerves (renal [kidney] denervation). This disrupts the nerve activity to and from the kidneys. This is done using an experimental medical device called the Symplicity® Catheter System™. The System includes a catheter (thin tube) that is inserted into your blood vessels and an energy generator that produces the high temperature.

The Symplicity Catheter System is considered an investigational device. Investigational means that the System is not approved by the U.S. Food and Drug Administration (FDA).

In earlier research studies, the Symplicity Catheter was used in more than 219 subjects in the US, Europe, and Australia. Those studies have shown that renal denervation can safely and significantly reduce blood pressure in subjects with uncontrolled blood pressure.

The purpose of this study is to provide additional information about the Symplicity Catheter System. We would like to find out if the System can help lower blood pressure in subjects whose blood pressure is not controlled, despite treatment with many blood pressure medications. We also want to find out if the Symplicity Catheter System is safe without causing too many side effects.

We are asking you to take part in this study because your blood pressure is not currently controlled with medications.

Up to 1060 people will be enrolled in this study at up to 90 hospitals. About 30 subjects will take part in this research study at Brigham and Women's Hospital (BWH).

The maker of the device, Medtronic Ardian (www.ardian.com) is paying for this study to be done.

How long will I take part in this research study?

It will take you 3 years and 2 months to complete this research study. During this time, we will ask you to make between 9-14 study visits to BWH. The number of visits you will make depends on which study group you are assigned to.

What will happen in this research study?

If you choose to take part in this study, we will ask you to sign this consent form before we do any study procedures.

During the Screening Period, we will do some tests and procedures to see if you qualify to take part in this research study. The study doctor will review the results of these tests and procedures. If you don't qualify, the study doctor will tell you why.

Visit 1 (Screening 1):

The visit will take about 1 hour. During this visit, we will:

- Measure your office blood pressure to confirm that your systolic blood pressure (the top number of a blood pressure reading) is greater than 160 mmHg. (See Office Blood Pressure below.)
- Ask you about your medical history
- Perform a physical exam
- Provide you with a blood pressure monitor to record your blood pressure at home. For at least two weeks, we will ask you to take your own blood pressure at home and record the measurements along with all of your medications every day. We will show you how to take your blood pressure with the monitor.

Office Blood Pressure (BP)

Your blood pressure measurements are the most important measurement of this study. It will be used to evaluate whether the renal denervation procedure is helpful in lowering blood pressure.

At each visit, it will take 20-30 minutes to measure your BP. In preparation for your office blood pressure measurements, we will ask you to try to follow the below guidelines:

- It is important that you take all prescribed medications at your usual times on the day of these office BP measurements. If you have not taken your medications as usual, you will be asked to return for another office BP visit when you have taken your medications.
- At least thirty minutes before you come in for your study visit, you need to avoid caffeine, smoking, and exercising.
- During the BP measurements, we will ask you to sit quietly in a chair with both of your feet flat on the ground for at least 5 minutes before multiple BP readings are taken.

Contacting your Family Doctor

We will contact your family doctor to let him/her know of your decision to take part in this research study. Please write your family doctor's name and phone number below.

Name of family doctor: _____

Telephone number: _____

Visit 2 (Screening 2):

This visit will take place about 2 weeks after Visit 1. The visit will last about 1 hour. At this visit, we will:

- Review your home blood pressure and medication recordings.
- Measure your office blood pressure to confirm that it is still greater than 160 mmHg.
- Draw blood samples.
- Ask you for a urine sample.
- Test your blood or urine for pregnancy, if you are a female able to become pregnant. Pregnant women cannot take part in this research study.

- We will fit you with a 24 hour ambulatory blood pressure monitor (described below).

If all the testing indicates you are eligible for the study, we will schedule you to be admitted to the hospital for the final step of the screening process.

Ambulatory Blood Pressure Monitoring (ABPM)

ABPM is done at home by wearing a device that will occasionally record your blood pressure over a 24 hour period. This device will not cause you to change your daily activities. You will be asked to keep a diary of your activities; including recording the time you take your medication and your awake and sleep times.

Visit 3/Day 1 (Screening 3/Assignment to the Study Group):

This visit will take place within 30 days of Visit 2. The final step of the screening process is a Catheterization Laboratory (Cath Lab) procedure. This procedure will be performed in the hospital and will take approximately 30 to 75 minutes.

Cath Lab Procedures:

Renal Angiography will be used to find out if your renal artery anatomy is eligible for the study. The procedure will require a small incision (cut) or insertion of a needle in your groin area and placement of a small tube in the artery in your groin. A small catheter (thin tube) will be inserted though the tube and into the main arteries of your kidneys. Your study doctor will inject contrast (dye) through the tube during the procedure. The dye and imaging (like an x-ray) will be used to help the study doctor visualize and evaluate the arteries to your kidneys.

Throughout the procedure, you will be given medications that are intended to make you sleepy and keep you comfortable. We will also ask you to wear an eye mask and earphones to prevent you from knowing which group you are assigned (see below).

During this Cath Lab procedure, if the renal angiogram shows that your renal artery anatomy is not eligible for the study, you will not receive the renal denervation procedure. It is estimated that 20-30 out of 100 subjects will not have eligible anatomy. If you are not eligible, you will be told so after the angiogram. If you don't qualify to continue in the study, you will not be required to return for additional study visits.

If the renal angiogram imaging confirms that you are eligible for the study, we will assign you to chance (like flipping a coin) to one of the following study groups.

- Renal Denervation Group: After the renal angiogram, you will immediately receive the renal denervation procedure using the Symplicity Catheter System.
- Control Group: After the renal angiogram, you will NOT undergo the renal denervation procedure.

You and the study doctor cannot choose your study group. You will NOT know which group you are assigned to, but the study doctor will know. You will have a 2 out of 3 chance of being assigned to the Renal Denervation Group. You will have a 1 out of 3 chance of being assigned to the Control Group.

No matter which study group you are assigned to, we will ask you to stay overnight in the hospital.

The Renal Denervation Procedure

The Renal Denervation Procedure will be performed immediately following the renal angiogram if you are assigned to the Renal Denervation Group.

During the procedure, imaging (like x-ray) will be used to advance the denervation catheter (Symplicity Catheter System) through the tube in the artery in your groin. The denervation catheter will be positioned at multiple locations in the arteries to your kidneys. At each location, heat by radiofrequency will be delivered through the artery wall to the nerves. This should disrupt the nerve activity to and from the kidneys. Radiofrequency is a type of energy that uses radio waves to produce heat that disrupts the nerves that lead to the kidneys.

Throughout the procedure, we will continue to give you medications to make you sleepy and keep you comfortable. We will also give you an eye mask to wear and earphones. This will prevent you from knowing which group you are in.

No matter which group you are assigned to, you will continue to take your prescribed (same daily doses and medication types) medications without any changes unless medically necessary.

Follow-up Visit Schedule

We will call you after 2 weeks of being discharged from the hospital to ask about any side effects or health problems you may be experiencing. You will be asked to return for Follow-up Visits 1, 3, and 6 months after Visit 3. Your follow up schedule after 6 months will depend on which study group you are in. We may ask you to make additional visits if your blood pressure cannot be appropriately measured at a visit, if you do not take your medications as prescribed, or if your medication changes.

1 Month Visit (Visit 4) and 3 Month Visit (Visit 5)

The visits will last about 1 hour. During each visit, we will:

- Measure your office BP and heart rate. The staff member who is taking your blood pressure will not know which study group you have been assigned to.
- Perform a physical exam
- Review your medications
- Ask you about side effects or health problems since your last visit
- Draw blood samples
- Ask you to provide a urine sample

At 6 month Visit (Visit 6)

The visit will last about 2 hours. Before the visit, we will ask you to measure and record your blood pressure at home and record the medications you take every day for 2 weeks.

During this visit, we will:

- Measure your office BP and heart rate.
- Perform a physical exam

- Review your medications
- Ask you about side effects or health problems since your last visit
- Draw blood samples
- Ask you to provide a urine sample
- Ask you to complete a 24 hour ABPM
- Perform a renal artery duplex ultrasound imaging of your renal arteries and kidneys. An ultrasound uses sound waves to make pictures of the blood flow in the arteries inside your body. You will lie on a table. The operator will put a gel on your skin so the probe can make good contact. Then the operator will place the probe on your skin over your renal arteries and kidneys and will move it back and forth. The probe is like a hand-held microphone. This procedure takes approximately 20-30 minutes.

  A renal angiography may need to be done if the renal duplex ultrasound imaging result shows a possible concern.

At your 6 Month Visit, you will find out which study group you were assigned to. If you are assigned to the Control Group, you may be eligible to have the renal denervation procedure. (See below)

Renal Denervation Group: Follow Up Visits 7-11 (12, 18, 24, 30, and 36 months)

If you are assigned to the Renal Denervation Group, we will ask you come in for Follow-up Visits 12, 18, 24, 30, and 36 months after Visit 3.

The visits will take about 1 hour. During the visits, we will:

- Measure your office BP and heart rate.
- Perform a physical exam
- Review your medications
- Ask you about side effects or health problems since your last visit
- Draw blood samples

- Ask you to provide a urine sample
- Ask you to complete a 24 hour ABPM (12 month only)

Control Group: Follow-up Visits At the 6 Month Visit, you will find out which group you are in. If you are in the Control Group, you and your study doctor will discuss the option of having the renal denervation procedure. The same renal denervation procedures will be done that are discussed above. If you choose to have the renal denervation procedure, it will take place on Visit 7.

Control Group Subjects Wanting the Renal Denervation Procedure will have the following visits: 1 Month, 3 Month, 6 Month, 12 Month, 18 Month, 24 Month, and 30 Month Visits After the Renal Denervation Procedure (Visits 8-14).

The Renal Denervation Procedure for the Control Group Wanting the Procedure

The Renal Denervation Procedure will be performed immediately following the renal angiogram at Visit 7.

During the procedure, imaging (like x-ray) will be used to advance the denervation catheter (Symplicity Catheter System) through the tube in the artery in your groin. The denervation catheter will be positioned at multiple locations in the arteries to your kidneys. At each location, heat by radiofrequency will be delivered through the artery wall to the nerves. This should disrupt the nerve activity to and from the kidneys. Radiofrequency is a type of energy that uses radio waves to produce heat that disrupts the nerves that lead to the kidneys.

Throughout the procedure, we will continue to give you medications to make you sleepy and keep you comfortable.

You will continue to take your prescribed (same daily doses and medication types) medications without any changes unless medically necessary.

Follow-up Visit Schedule

We will call you after 2 weeks of being discharged from the hospital to ask about any side effects or health problems you may be experiencing. You will be asked to return for Follow-up Visits 1,

3, and 6 months after Visit 7. We may ask you to make additional visits if your blood pressure cannot be appropriately measured at a visit, if you do not take your medications as prescribed, or if your medication changes.

1 Month Visit (Visit 8**) and 3 Month Visit (Visit** 9**)**

The visits will last about 1 hour. During each visit, we will:

- Measure your office BP and heart rate. The staff member who is taking your blood pressure will not know which study group you have been assigned to.
- Perform a physical exam
- Review your medications
- Ask you about side effects or health problems since your last visit
- Draw blood samples
- Ask you to provide a urine sample

At 6 month Visit (Visit 10**)**

The visit will last about 2 hours. Before the visit, we will ask you to measure and record your blood pressure at home and record the medications you take every day for 2 weeks.

During this visit, we will:

- Measure your office BP and heart rate.
- Perform a physical exam
- Review your medications
- Ask you about side effects or health problems since your last visit
- Draw blood samples

- Ask you to provide a urine sample
- Ask you to complete a 24 hour ABPM
- Perform a renal artery duplex ultrasound imaging of your renal arteries and kidneys. An ultrasound uses sound waves to make pictures of the blood flow in the arteries inside your body. You will lie on a table. The operator will put a gel on your skin so the probe can make good contact. Then the operator will place the probe on your skin over your renal arteries and kidneys and will move it back and forth. The probe is like a hand-held microphone. This procedure takes approximately 20-30 minutes.

  A renal angiography may need to be done if the renal duplex ultrasound imaging result shows a possible concern.

Renal Denervation: Follow Up Visits 11-14 (12, 18, 24, and 30 months)

The visits will take about 1 hour. During the visits, we will:

- Measure your office BP and heart rate.
- Perform a physical exam
- Review your medications
- Ask you about side effects or health problems since your last visit
- Draw blood samples
- Ask you to provide a urine sample
- Ask you to complete a 24 hour ABPM (12 month only)

<u>If you decide NOT to have the renal denervation procedure after the 6 Month Visit,</u> you will come in for 12 Month, 24 Month, and 36 Month Visits:

The visits will last about 1 hour. During the visits, we will:

- Measure your office BP and heart rate.

- Perform a physical exam
- Review your medications
- Ask you about side effects or health problems since your last visit
- Draw blood samples
- Ask you to provide a urine sample

We will draw a total of about a 1/2 cup of blood over the course of the entire study. By comparison, the Red Cross allows a healthy adult to donate 1 unit (about 2 cups) of blood every 8 weeks.

For your safety during the study

It is important to tell your study doctor and the research staff about any treatments or medications you may be taking, including prescription medications, non-prescription medications, vitamins, or herbal remedies. It is important that you tell us about any changes that are made to these while you are taking part in the study. It is also very important that you continue to take your medications as prescribed through the course of the study. If any other doctor changes your medication prescription, you must notify the study doctor or staff immediately. This is very important to be able to tell if the study treatment is working.

Please also tell the research staff of any significant lifestyle changes you may make during the study, including:

- stopping or starting smoking
- modifying your diet to influence your weight
- increasing or decreasing your typical alcohol consumption

During the research study, before you undergo any other medical treatment you must first discuss it with your study doctor. This does not apply in a medical emergency, but your study doctor must be informed immediately of any emergency treatment.

Sending Study Information to Research Collaborators Outside Partners

We will send your renal angiogram to researchers working with us at Cardiovascular Research Foundation, New York. We will label all your study information with a code number instead of your name. The key to the code connects your name to your study information. We will keep the key to the code here at Partners. No one outside Partners will know which information and/or samples are yours. If at any time you choose to stop taking part in the study and want to have your samples destroyed, contact the study doctor.

The study sponsor, Medtronic, may use your health information to conduct the research described in the informed consent and perform regulatory oversight, quality assurance activities and billing and payment activities. The sponsor may also use your health information for additional purposes, such as overseeing and improving the performance of its device, new medical research and proposals for developing new medical products or procedures, and other business purposes.

Medtronic will not use your health information to market to you and Medtronic will not place your name on a mailing list or sell your name or information to anyone for marketing purposes.

What are the risks and possible discomforts from being in this research study?

Risks of Catheterization

The main risks of the procedure are similar to the risks of all diagnostic procedures requiring catheterization of the arteries in your body. The following are possible risks of the catheterization procedure, which includes the renal angiogram with or without the denervation procedure:

- Death
- Cardiopulmonary arrest (heart stops beating and you stop breathing)
- Heart rhythm disturbances including bradycardia (a slowed heart rate)
- Embolism. A formation and dislodgement of a blood clot or dislodgement of cholesterol/plaque within the blood vessel. The blood clot or cholesterol/plaque travels downstream into small vessels, blocking blood flow, and causing temporary or permanent damage to organs in the body. Clots are known to cause heart attack, stroke, kidney damage, or threaten circulation to arms or legs and may ultimately lead to incapacitation (disabled) or death.

- Complications at catheter insertion site in the groin such as:
    - Pain
    - Bruising
    - Hematoma (collection of blood outside a blood vessel)
    - Pseudoaneurysm (injury to the artery wall resulting in a build up of blood under the skin)
    - AV fistula (an abnormal connection or passageway between an artery and a vein)
    - Infection
    - Significant bleeding
- Retroperitoneal bleeding (bleeding into the abdominal [belly] space)
- Vascular (blood vessel) complications requiring surgery
- Perforation (hole) or dissection (cut) of a blood vessel, such as the renal artery
- Hypotension (blood pressure too low)
- Hypertension (blood pressure too high)
- Nausea or vomiting

- Complications associated with the use of any pain or anxiety medication during or after the procedure

- Complications associated with the contrast agent used during the procedure, for example, serious allergic reaction or reduced kidney function.

  As with any drug, an allergic reaction can occur. Allergic reactions can be mild or serious, and can even result in death in some cases. Common symptoms of an allergic reaction are rash, itching, skin problems, swelling of the face and throat, or trouble breathing. If you think you are having an allergic reaction, call the study doctor right away. If you are having trouble breathing, tell the study doctor immediately.

There are additional risks that could possibly be associated with the denervation procedure/response to the procedure. These potential risks may include:

- Pain during or after the procedure that may require treatment with pain medications.

- Damage to one or both kidneys and/or loss of kidney function. If severe enough, this could require dialysis.

- Damage to the blood vessel wall or other body structures from the delivery of energy used during the procedure For example, renal artery stenosis (narrowing of blood vessel), spasm, or aneurysm (ballooning of blood vessel wall).

- Hypertension

- Lowering of blood pressure too far and/or too quickly. This can possibly lead to organ failure, orthostatic hypotension (dizziness upon standing), dizziness, or fatigue (tiredness).

- Hematuria (blood in urine)

- Proteinuria (increased amount of protein in urine)

- Allergic reaction and/or side effect from inserting a foreign body such as the catheter into your body
- Electrolyte disturbances (changes in the amount of salt in blood/urine)
- Skin burn

Risks of Blood Draw

- Excessive bleeding
- Fainting or light-headedness
- Haematoma (bruising)
- Infection, which can be treated
- Requirement of multiple punctures to locate a vein to draw the sample

Risks of Radiation

This research study involves exposure to a small amount of radiation. The radiation you will receive from this study is due to exposure from x-rays involving fluoroscopy and digital imaging. The radiation dose to patients having this procedure, on average, is estimated to be 2.8 (or if two procedures are performed) 5.6 mSv. A milliSievert (mSv) is a unit of radiation dose. This is equivalent to approximately 0.9-1.8 times the annual radiation dose to the general public from natural background sources.

Risks to an Embryo or Fetus or to a Breastfeeding Infant

The effect of the Symplicity Catheter System on an embryo or fetus (developing baby still in the womb), or on a breastfeeding infant, is unknown and may be harmful. Because of these unknown risks, women cannot take part in this study if they are:

- Pregnant
- Trying to become pregnant

- Breastfeeding

If you are a menopausal woman and have not had a period for the past 12 months or more, you will not need to have a pregnancy test. Also, you will not need to have a pregnancy test if you have had a hysterectomy (surgical removal of your uterus and/or ovaries). All other female subjects must have a negative pregnancy test before having the cath lab procedure.

If you are sexually active and able to become pregnant, you must agree to use one of the birth control methods listed below. If you are already using birth control, you must check with the study doctor or study staff to make sure it is okay to use during this study. You should begin a form of birth control, or maintain abstinence, prior to study drug administration and throughout the entire study period. These practices will be required to have been begun prior to your most recent menstrual period to ensure pregnancy does not occur during the study period.

Acceptable birth control methods for use in this study are:

- hormonal methods, such as birth control pills, patches, injections, the vaginal ring, or implants
- barrier methods (such as a condom or diaphragm) used with a spermicide (a foam, cream, or gel that kills sperm)
- intrauterine device (IUD)
- abstain from sexual intercourse (no sex)

If you miss a period, or think you might be pregnant during the study, you should tell the study doctor immediately. He/she will advise you on getting further medical attention should this be necessary. If you become pregnant, you will need to stop taking part in this study. The study doctor may ask for your permission to collect information about the outcome of your pregnancy and the condition of your newborn.

Other Risks

The study may involve other unknown or unforeseen side effects or complications.

If any complications occur during the study, the complications may lead to repeat or prolonged hospitalization, repeat procedures, emergency surgery, or other emergency procedures. In rare cases, a complication could lead to death.

Although there are risks associated with taking part in this study, there will be a panel of doctors independent of the study that will monitor the safety of the study. They will be overseeing your safety and the safety of all study participants. For this reason, you should report any and all

problems that you are having to the research staff. If you have any distress associated with taking part in the study, you can delay or stop taking part in the study at any time.

What are the possible benefits from being in this research study?

You may not benefit from taking part in this study. If you receive the Symplicity Catheter System, it is possible that your blood pressure may be lowered. Lowering your blood pressure may decrease your risk of other related health problems associated with high blood pressure such as heart attack, stroke, and heart failure. However, because the Symplicity Catheter System is not FDA-approved, you currently cannot have the renal denervation procedure using the Symplicity Catheter System if you do not take part in this study. We cannot guarantee or promise that you will receive any benefits from taking part in this study.

Information gained from this study may benefit others with uncontrolled high blood pressure in the future.

What other treatments or procedures are available for my condition?

You do not have to take part in this research study to be treated for uncontrolled high blood pressure. Other treatments available to treat uncontrolled high blood pressure include:

- Management with medications such as: Angiotensis II receptor blockers (losartan [Cozaar], valsartan [Diovan]); Beta Blockers (atenolol [Tenormin], metoprolol [Toprol]); and Calcium Channel Blockers (amlodipine [Norvasc]).
- Lifestyle modifications (for example increased physical activity, weight loss, dietary modifications)
- Identification and treatment of underlying causes of hypertension, if possible
- Aggressive medical management of other condition that may be contributing to hypertension

Talk with the study doctor if you have questions about any of these treatments or procedures.

Can I still get medical care within Partners if I don't take part in this research study, or if I stop taking part?

Yes. Your decision won't change the medical care you get within Partners now or in the future. There will be no penalty, and you won't lose any benefits you receive now or have a right to receive.

Taking part in this research study is up to you. You can decide not to take part. If you decide to take part now, you can change your mind and drop out later. We will tell you if we learn new information that could make you change your mind about taking part in this research study.

What should I do if I want to stop taking part in the study?

If you take part in this research study, and want to drop out, you should tell us. We will make sure that you stop the study safely. We will also talk to you about follow-up care, if needed.

It is possible that we will have to ask you to drop out before you finish the study. If this happens, we will tell you why. We will also help arrange other care for you, if needed.

Your participation may be discontinued if we determine that you are not eligible for the study, or that it is not in your best interest to continue your participation.

We may also learn new information that could make you change your mind about taking part in this research study. This new information may mean that you can no longer participate in this research. It could also mean that the sponsor may suspend or prematurely end the study. If this occurs, the person(s) supervising the research will stop your participation. In all cases, you will be offered care to suit your needs and medical condition."

If you decide to withdraw from this study, please notify a member of the research team in writing to the following address:

Dr. Mark Creager
Brigham and Women's Hospital
75 Francis Street
Boston, MA 02115.

If you withdraw consent prior to your 6 month visit, the study doctor may contact you or a family member at 6 months to assess your health status, with your permission.

Will I be paid to take part in this research study?

You will not be paid to take part in this study.

We will pay for your parking in the hospital garage during study visits. We will also pay for the cost of your transportation up to $25.

We may use your samples and information to develop a new product or medical test to be sold. The Sponsor, hospital, and researchers may benefit if this happens. There are no plans to pay you if your samples or information are used for this purpose.

What will I have to pay for if I take part in this research study?

Study funds will pay for the renal denervation procedure, the Symplicity Catheter System, renal angiogram, overnight stay in the hospital, study visits, and all the study-related procedures that are done only for research.

Study funds will pay for certain study-related items and services. However, we may bill your health insurer for, among other things, routine items and services you would have received even if you did not take part in the research. You will be responsible for payment of any deductibles and co-payments required by your insurer for this routine care or other billed care.

If you have any questions about costs to you that may result from taking part in the research, please speak with the study doctors and study staff. If necessary, we will arrange for you to speak with someone in Patient Financial Services about these costs.

What happens if I am injured as a result of taking part in this research study?

We will offer you the care needed to treat any injury that directly results from taking part in this research study. We reserve the right to bill your insurance company or other third parties, if appropriate, for the care you get for the injury. We will try to have these costs paid for, but you may be responsible for some of them. For example, if the care is billed to your insurer, you will be responsible for payment of any deductibles and co-payments required by your insurer.

Medtronic Ardian may pay for medical treatment for any injury that is not paid for by your health insurer if the injury is a direct result of your taking part in the study. Medtronic Ardian has no plans to offer you any other payments or other type of compensation.

Injuries sometimes happen in research even when no one is at fault. There are no plans to pay you or give you other compensation for an injury, should one occur. However, you are not giving up any of your legal rights by signing this form.

If you think you have been injured or have experienced a medical problem as a result of taking part in this research study, tell the person in charge of this study as soon as possible. The researcher's name and phone number are listed in the next section of this consent form.

If I have questions or concerns about this research study, whom can I call?

You can call us with your questions or concerns. Our telephone numbers are listed below. Ask questions as often as you want.

Mark A. Creager, M.D., is the person in charge of this research study. You can call him at (617) 732-5267. Dr. Creager is available M-F 9-5. He is also available 24/7 for emergencies at (617) 732-5500. You can also call Reena L. Pande, M.D., at (617) 732-5500 available M-F 9-5 or 24/7 (for emergencies only) with questions about this research study.

If you have questions about the scheduling of appointments or study visits, call our research assistants at 617-732-6320.

If you want to speak with someone **not** directly involved in this research study, please contact the Partners Human Research Committee office. You can call them at 617-424-4100.

You can talk to them about:

- Your rights as a research subject
- Your concerns about the research
- A complaint about the research

Also, if you feel pressured to take part in this research study, or to continue with it, they want to know and can help.

If I take part in this research study, how will you protect my privacy?

During this research, identifiable information about your health will be collected. In the rest of this section, we refer to this information simply as "health information." In general, under federal law, health information is private. However, there are exceptions to this rule, and you should know who may be able to see, use, and share your health information for research and why they may need to do so.

In this study, we may collect health information about you from:

- Past, present, and future medical records
- Research procedures, including research office visits, tests, interviews, and questionnaires

Who may see, use, and share your identifiable health information and why they may need to do so:

- Partners research staff involved in this study
- The sponsor(s) of this study, and the people or groups it hires to help perform this research
- Other researchers and medical centers that are part of this study and their ethics boards
- A group that oversees the data (study information) and safety of this research
- Non-research staff within Partners who need this information to do their jobs (such as for treatment, payment (billing), or health care operations)
- The Partners ethics board that oversees the research and the Partners research quality improvement programs.
- People from organizations that provide independent accreditation and oversight of hospitals and research
- People or groups that we hire to do work for us, such as data storage companies, insurers, and lawyers
- Federal and state agencies (such as the Food and Drug Administration, the Department of Health and Human Services, the National Institutes of Health, and other US or foreign government bodies that oversee or review research)
- Public health and safety authorities (for example, if we learn information that could mean harm to you or others, we may need to report this, as required by law)
- Other: Central Laboratories (i.e., facility that processes the blood and urine samples, or review angiogram or duplex ultrasound images)

Some people or groups who get your health information might not have to follow the same privacy rules that we follow. We share your health information only when we must, and we ask anyone who receives it from us to protect your privacy. However, once your information is shared outside Partners, we cannot promise that it will remain private.

Because research is an ongoing process, we cannot give you an exact date when we will either destroy or stop using or sharing your health information.

The results of this research study may be published in a medical book or journal, or used to teach others. However, your name or other identifying information **will not** be used for these purposes without your specific permission.

Your Privacy Rights

You have the right **not** to sign this form that allows us to use and share your health information for research; however, if you don't sign it, you can't take part in this research study.

You have the right to withdraw your permission for us to use or share your health information for this research study. If you want to withdraw your permission, you must notify the person in charge of this research study in writing. Once permission is withdrawn, you cannot continue to take part in the study.

If you withdraw your permission, we will not be able to take back information that has already been used or shared with others.

You have the right to see and get a copy of your health information that is used or shared for treatment or for payment. To ask for this information, please contact the person in charge of this research study. You may only get such information after the research is finished.

Informed Consent and Authorization

Statement of Study Doctor or Person Obtaining Consent

- I have explained the research to the study subject.
- I have answered all questions about this research study to the best of my ability.

_____ _____

Study Doctor or Person Obtaining Consent Date/Time

Statement of Person Giving Informed Consent and Authorization

- I have read this consent form.
- This research study has been explained to me, including risks and possible benefits (if any), other possible treatments or procedures, and other important things about the study.
- I have had the opportunity to ask questions.
- I understand the information given to me.

Signature of Subject:

I give my consent to take part in this research study and agree to allow my health information to be used and shared as described above.

Subject Date/Time

Consent Form Version: June 28, 2012