

**INFORMED CONSENT FORM**  
**Willing to Accept a Donor Offer From**  
**HCV NAT- Positive Donors**

*Patient Label*

1. I understand that I may be offered an organ from a donor with hepatitis C infection (HCV NAT- positive). This will be because my transplant doctor feels the benefit of accepting this organ outweighs the risk. The specific benefits and risks of taking this organ have been explained to me and will be discussed again at the time of transplantation. I can refuse the organ and my status on the waiting list will not be affected.
2. I understand that receiving an organ from a hepatitis C infected (HCV NAT- positive) donor means that I will become infected with hepatitis C.
3. I understand that I will receive effective hepatitis C antiviral treatment immediately after my transplant.
4. I understand that the treatment for hepatitis C is very effective and more than 95% of patients with Hepatitis C infection can be successfully treated with 12 weeks of very safe and well tolerated medications.
5. I understand that the cost of the hepatitis C treatment will be covered.
6. I understand that I can ask a transplant physician about any questions that I may have on receiving an organ from hepatitis C infected donors at any time to assist me in making an informed decision.

**I understand the above and would be willing to be offered an organ from hepatitis C NAT-positive donor.**

Name: (Mr., Mrs., Ms.) \_\_\_\_\_  
SURNAME GIVEN NAMES

SIGNATURE: \_\_\_\_\_  
(PATIENT OR GUARDIAN) (PRINT NAME IF NOT THE PATIENT)

\_\_\_\_\_  
(Relationship to Patient if not the Patient) DATE: \_\_\_\_\_

WITNESS \_\_\_\_\_  
(SIGN) (PRINT NAME)

DATE: \_\_\_\_\_

**STATEMENT BY PROFESSIONAL INTERPRETER**

COMPLETE **ONLY** IF A PROFESSIONAL INTERPRETER IS USED TO OBTAIN CONSENT.

I have translated the above information to the: \_\_\_\_\_ Patient/Client \_\_\_\_\_ parent \_\_\_\_\_ legal guardian or representative and I have interpreted their responses to the health care provider.

\_\_\_\_\_  
SIGNATURE OF INTERPRETER PRINT NAME DATE SIGNED