

Texas KidsCanSeq Study

Date

Patient's Name Address Address

Office:	832-824-4724
Fax:	832-825-4276
Mailing Address:	Suite 1200 Feigin Center
	1102 Bates Street
	Houston, TX 77030
Clinic: Texas Children's Cancer Center	
14 th Floor, Suite 1410	
	6701 Fannin St.
	Houston, TX 77030

Re: <u>Name</u> (DOB: <u>###</u>, MRN: <u>###</u>)

Dear Patient's Name,

As a reminder, your parent or legal guardian gave permission for you to take part in a research study (called the Texas KidsCanSeq study) about the genetics of cancer. Your genetic testing results from the study were reviewed with your cancer doctor and are in your medical record at <u>KidsCanSeq</u> <u>Institution</u>. This information may be helpful to you and your family members.

We would like to share these results with you. Since you have turned 18 years old, we need your consent to continue participating in the KidsCanSeq study so that we can return those results to you. We have not been able to reach you by phone to talk about this.

If you want to learn about these genetic testing results, or have any other questions, please call <u>STUDY COORDINATOR</u>, the study coordinator, at <u>phone number</u>. Thank you for participating in the Texas KidsCanSeq study.

Sincerely,

The KidsCanSeq Study Team