

Consent Form – Bicuspid Aortic Valve Screening

Many thanks for attending this screening with Cardiac Risk in the Young (CRY). A lot of our work is research aimed at improving our understanding of inherited cardiac conditions.

One of the areas in the heart we are trying to understand more about is the main valve (the “aortic valve”) and vessel exiting the heart (the “aorta”). 1 in 100 individuals are thought to have a condition affecting at least one of these. The majority of these problems are minor abnormalities that simply require surveillance.

We are running a study looking at identifying problems with the aortic valve and aorta by performing a very focused echocardiogram. It will take around 2 minutes to perform the scan. You **may** be offered the chance to have this performed today. It will involve a small amount of gel being put on the chest and the ultrasound probe being placed to look **specifically** at the aortic valve and aorta. It is not painful, although the gel might be slightly cold!

It is important to note that this **scan will not give us any information about the other structures in the heart and in a small proportion of individuals, it may still miss a problem with either the aortic valve or aorta.**

If any abnormality is found, the doctor will talk to you about it today and give you more information.

If you are happy to have this performed today as part of your screening, please sign below.

Name:

Signature:.....

Date:.....