

## CONSENT FORM

### Project: The effect of retinal image defocus on choroidal blood flow

This form will be held for a period of 6 years, after which it will be destroyed

Name of Researchers:

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I have read the Participant Information Sheet and have understood the nature of the research and why I have been selected. I have had the opportunity to ask questions and have them answered to my satisfaction.

- I agree to take part in this research and understand that I will be asked to visit the eye clinic on two occasions for a total time of up to three hours.
- I understand that my participation is voluntary and I am free to withdraw from the study without giving a reason by notifying any of the researchers of my wish to do so as well as to withdraw any data traceable to me up to one month after data collection.
- I understand that I will be required to wear contact lenses as well as undergo OCT and MRI as a part of the study. I understand that there are chances of possible claustrophobic reaction in MRI scans as well as possible discomfort on wearing contact lenses. I agree to be referred for further investigation, should significant abnormalities in my eyes be found. I have been informed of these risks, and have had the opportunity to have my questions and concerns about these answered.
- I understand that participation or non-participation in the study will bear no penalties or loss of benefits with regard to the services provided to me by the University of Auckland Optometry Clinic and will have no effect on my grades if I am a student of the department.
- I understand that the information about my identity collected during the experiments will be confidential and will not be used in any reports of the study. All the data collected from me will be stored securely, in locked cabinets and on secure computer networks. Only the investigators will have access to this information, and the data will be made anonymous.

Name (print name): .....

Signature: ..... Date: .....

I wish to receive a copy of summary results of this study (Email: .....)