

Consent Form

Faculty of Medicine, Dentistry and Health Sciences.



THE RECTANGULAR BLOCK IMPLANT – A PILOT STUDY

Responsible Researcher:

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Additional Researchers:

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- Dr. Efthimios Gazelakis
(Project Supervisor, Honorary Staff, MDS),
- Dr. Ricky Kumar
(Specialist Maxillofacial Surgeon, External Researcher, Dental Health Services Victoria),
- A/Professor Joseph Palamara
(Dental Restorative and Material Physicist, MDS)

Name of Participant:

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1. I consent to participate in this project, the details of which have been explained to me, and I have been provided with a written plain language statement to keep.
 2. I understand that the purpose of this research is to investigate the success and survival of the Rectangular Block Implant (RBI) in humans.
 3. I understand that my participation in this project is for research purposes only and I acknowledge that the possible effects of participating in this research project have been explained to my satisfaction.
 4. In this project I will be required to undergo implant surgery with prosthodontic and maxillofacial preoperative and postoperative assessment that will require constant follow up visits at the first week, third week, and every sixth month thereafter till the fifth year of RBI placement.
 5. I understand that, for clinical record keeping purposes during the study, my RBI case will be photographed clinically before, during, immediately after, a week later, three months later, six months later and a year after.
 6. I understand that dental X-rays will be taken before, during, immediately after, a week later, three months later, six months later and a year after my RBI treatment. Cone Beam Computed Tomography (CBCT) will be used to plan and assess my case at the beginning of the study and at the one-year mark.
 7. I understand that impressions of my mouth will be taken for construction of dental models and I will fill out a patient's level of satisfaction questionnaire during and after the placement of the RBI.
 8. I have been explained and understand the importance of maintaining satisfactory oral hygiene.
 9. I understand that there will be total number of ten participants that will be chosen for this pilot study.

10. I understand that my participation is voluntary and that I am free to withdraw from this project anytime without explanation or prejudice and to withdraw any unprocessed data that I have provided.
11. I understand that the data from this research will be stored in a secure password protected server at the Royal Dental Hospital of Melbourne.
12. I have been informed that the confidentiality of the information I provide will be safeguarded subject to any legal requirements; my data will be password protected and accessible only by the named researchers.
13. I understand that after I sign and return this consent form, it will be retained by the researchers of the RBI project.

Participant Signature: _____ **Date:** _____