



THE UNIVERSITY OF
SYDNEY



Health
Sydney
Local Health District

PARTICIPANT CONSENT FORM

I, _____ *[full name]*

Of _____ *[address]*

have read and understood the Participant Information Sheet on the abovenamed research study and have discussed the study with Dr. Denny Luo.

- I have been made aware of the procedures involved in the study, including any known or expected inconvenience, risk, discomfort or potential side effect and of their implications as far as they are currently known by the researchers.
- I understand that my participation in this study will allow the researchers and others, as described in the Information for Participants, to have access to my dental record, and I agree to this.
- I understand that my de-identified data may be used for future research and I agree to this.
- I would like to receive a copy of the study results when they become available. My email address is: _____
- I understand that, during the course of this study, my records may be accessed by Sydney Dental Hospital, by regulatory authorities or by the Ethics Committee approving the research in order to verify results and determine that the study is being carried out correctly.
- I understand that the SLHD software license for REDCap (Research Electronic Data Capture) will be used to manage the collection and storage of my research data.
- I have had an opportunity to ask questions and I am satisfied with the answers I have received.
- I freely choose to participate in this study and understand that I can withdraw at any time.

- I also understand that the research study is strictly confidential.
- I hereby agree to participate in this research study.
- I consent to the storage and use of my information collected from me for use, as described in the relevant section of the Participant Information Sheet, for this specific research project.

Participant Name: _____

Participant Signature: _____

Date: _____

Name of Person conducting informed consent: _____

Signature of Person conducting informed consent: _____

Date: _____