



Patient Information Sheet

Name of Participant:

Title:

You are invited to take part in this research study. The information in this document is meant to help you decide whether to take part in this study. Please feel free to ask if you have any queries or concerns.

You are being asked to participate in this study being conducted in Dr. N. D. Desai Faculty of Medical Science and Research, Nadiad, because you satisfy the eligibility criteria to participate, which are:

What is the purpose of research?

We will obtain permission from the Institutional Ethics Committee for conducting this study.

Study Procedures

Proposed research work will be conducted at Dr. N. D. Desai Faculty of Medical Science and Research, Nadiad

Study design:

- a. Number of subjects:** _____
- b. Place of research:** Dr. N. D. Desai Faculty of Medical Science and Research, Nadiad
- c. Study groups:** _____.
- d. Inclusion criteria:**



e. Exclusion criteria:

f. Method of analysis:

g. Possible risks to you

- There is no risk involved in this study.

h. Possible benefits to you

Earlier identification of renal damage can help in prevention of any kidney related complications.

i. Possible benefits to other people

The results of the research may provide benefits to the society in terms of advancement of medical knowledge and/or therapeutic benefit to future patients.

j. Cost to the participant

The tests will be performed free of cost to you.

k. Confidentiality of the information obtained from you

You have the right to confidentiality regarding the privacy of your medical information (personal details, results of physical examinations, investigations, and your medical history). By signing this document, you will be allowing the treating physician, other study personnel, hospital ethics committee to view your data, if required. The results of clinical tests and therapy performed as part of this research may be included in your medical record. The information from this study, if published in scientific journals or presented at scientific meetings, will not reveal your identity.

l. How will your decision in not participating in the study affect you?

Your decision not to participate in this research study will not affect your medical care or your relationship with the treating physician or the institution. Your doctor will still take care of you and you will not lose any benefits to which you are entitled.

m. Right to new information



**Dr. N. D. Desai Faculty of Medical Science and
Research, Dharmsinh Desai University, Nadiad**

If the research team gets any new information during this research study that may affect your decision to continue participating in the study, or may raise some doubts, you will be told about that information.

n. Contact persons

For further information / questions, you can contact us at the following address:

Principal Investigator:

In case of conflicts, you can contact the chairperson (convener) of our institutional ethics Committee at the following address:

Dr -----

Chairperson/ Member Secretary,

Dr. N. D. Desai Faculty of Medical Science and Research, Nadiad