



INFORMATION AND CONSENT FORM

Study Title: Performance of a Complete Cardiac Ultrasound using a novel Autonomous Robotic Quantitative Ultrasound System (ARQUS)

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Source of funding for the study:

NSERC Horizons Grant

You are being invited to participate in the research study mentioned above. This form provides information about what participating would mean. Please read it carefully before deciding if you want to participate or not. If there is anything you do not understand, or if you want more information, please ask the researcher.

A. PURPOSE

The purpose of the research is to validate the capabilities of the ARQUS is performing a complete cardiac ultrasound and obtain the required quantitative ultrasound measurements for assessing specific functions.

B. PROCEDURES

If you participate, you will be asked to obtain a cardiac ultrasound scan with the ARQUS.

In total, participating in this study will take between 60 and 90 minutes.

C. RISKS AND BENEFITS

You might face certain risks by participating in this research. These risks include:

- discomfort from lying down for a prolonged duration of time
- discomfort from slight pressure from the ultrasound probe.

D. CONFIDENTIALITY

We will gather the following information as part of this research: []

We will not allow anyone to access the information, except people directly involved in conducting the research. We will only use the information for the purposes of the research described in this form.

The information gathered will be anonymous. That means that it will not be possible to make a link between you and the information you provide.

All data are password-protected and kept on a secured server at Concordia University and Quebec Heart and Lung Institute.

We intend to publish the results of the research. However, it will not be possible to identify you in the published results.

At the end of this study, all data will be published in an open-source library in anonymized and randomized; the purpose of open-source data publication is to empower the research community and create resources that are not yet available for researchers to drive cardiovascular research forward.

F. CONDITIONS OF PARTICIPATION

You do not have to participate in this research. It is purely your decision. If you do participate, you can stop at any time. You can also ask that the information you provided not be used, and your choice will be respected. If you decide that you don't want us to use your information, you must tell the researcher [within 24 hours of completing the ultrasound scan](#).

If participants are being offered compensation:

As a compensatory indemnity for participating in this research, you will receive [\[N/A\]](#). If you withdraw before the end of the research, you will receive [\[N/A\]](#).

To make sure that research money is being spent properly, auditors from Concordia or outside will have access to a coded list of participants. It will not be possible to identify you from this list.

There are no negative consequences for not participating, stopping in the middle, or asking us not to use your information.

G. PARTICIPANT'S DECLARATION

I have read and understood this form. I have had the chance to ask questions and any questions have been answered. I agree to participate in this research under the conditions described.

NAME _____ (please _____ print)

SIGNATURE _____

DATE _____

If you have questions about the scientific or scholarly aspects of this research, please contact the researcher. Their contact information is on page I. You may also contact their faculty supervisor.

If you have concerns about ethical issues in this research, please contact the Manager, Research Ethics, Concordia University, 514.848.2424 ex. 7481 or oor.ethics@concordia.ca.