

Consent Form

Study Title

Interactions between peripheral blood-derived progenitor cell populations and biomaterials

Investigators

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*Contacts for questions or concerns.

Funding Sources

The funding sources of this study are McGill University and Saint-Gobain Ceramics & Plastics, Inc. (a private sponsor)

Introduction and Purpose of study

The objective of this research project is to study the interactions between blood and different types of plastics. In particular, we are studying how stem cells and other therapeutic cells found in blood interact with various vascular biomaterials such as stents. We also study how these cells react to the plastics used to make Petri dishes. The results of this study could help us develop better transplantation devices such as stents, as well as better materials to culture stem cells. The long-term goal of this study is to improve the treatment of cancer and cardiovascular disease using stem cells. To learn more about our research projects, please visit the website www.hoesli-lab.ca.

Possibility of Commercialization

The results of this study may help to improve commercial products and methods. The knowledge gained through this study may lead to financial gain of the private sponsor, Saint-Gobain Performance Plastics & Ceramics, Inc. and other companies involved in biomedical research. However, you will not be able to have any personal financial gain.

What will I have to do if I agree to participate?

You would give your permission for us to take your blood for the purpose of the research described above. The volume of blood that would be collected is 120 mL (about 1/3 of what you would normally donate at blood clinics). Participation in this research is voluntary. You may refuse to participate. You may stop the donation at any time of procedure.

Risks of Participation

As with any blood drawing, there is a slight risk of bleeding and bruising, causing minor discomfort. However, all the precautions are taken to minimize these risks.

Benefits of Participation

You will not benefit directly from participating in this research.

Compensation

You will receive \$30 in compensation and refreshments.

What About Confidentiality?

A unique code will be used to identify the results obtained from each blood sample. The only information communicated to the principal investigator and collaborators are your sex and age. Your personal information will be entered into a study logbook, which will be kept indefinitely in a locked secure place. Only researchers directly involved in the study will have access to this information. The researchers will not release any personal information that may identify you. The blood samples may be stored for at most 20 years.

The data generated from the experiments will be stored indefinitely. If the results of the study are published, your name and any information that discloses your identity will not be published.

Who do You Call if You Have Questions or Problems?

If you have questions about this study you can meet with the research investigator who is in charge of the study at McGill University (Prof. Corinne Hoesli) or the researcher in charge for the recruitment of donors (Lisa Danielczak). If you have any questions concerning your rights or related to ethics, please contact:

Ildé Lepore

Ethics officer

Ethics Institutional Review Board, McGill University, Faculty of Medicine

McIntyre Medical Building

#633 - 3655 Promenade Sir William Osler

Montreal, Quebec

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(514) 398-8302

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You will receive a copy of this form once it has been completed.

Consent

I have read the letter of information regarding the use of my blood for this research study. The study has been explained to me and my questions have been answered to my satisfaction. I agree to participate in this study. I do not waive any of my rights by signing this consent.

Signatures

Name of Participant

Signature of Participant

Date of Consent

Name of Researcher

Signature of Researcher

Date

Interview

Please complete the following questionnaire.

Demographic Data

Age: _____

Sex: Female Male

Last Donation

Last time of blood donation for research or other purposes:

Current medication

If you are currently using any drug on a regular basis, please specify the name of the drug and dosage:
