



AUSTRALASIAN ORTHODONTIC BOARD

PRIVACY CONSENT FORM

The Australasian Orthodontic Board (AOB) encourages orthodontists to continue their education and to improve and develop their expertise throughout their professional careers.

One of the requirements of AOB membership is that the orthodontist must submit case reports of selected patients on a regular basis. These case reports are assessed by peers and, occasionally, displayed and reviewed at orthodontic meetings.

Each case report describes the patient's dental and orthodontic history, findings at clinical examination, diagnosis, treatment plan, treatment details and treatment analysis.

The AOB respects the patient's right to privacy at all times. Therefore, the patient is identified by name to the AOB secretariat, and no-one else. The AOB secretariat is required to respect patient confidentiality. Personal information is not included in the case report. However, "before and after" photographs of the patient's face and teeth, models of the patient's teeth, and various x-rays are required to demonstrate treatment changes.

The orthodontist named below wishes to submit a case report of the patient named below to the AOB.

Please sign this form as confirmation that you have read and understood the AOB privacy policy and consent to the use of the patient's information in this way.

Name of Patient:

Patient/Parent Signature if minor:

Date:

Orthodontist's Name:

Orthodontist's Signature:

Date: