APPENDIX B PERMISSION FORM

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23 May 2007

Dr M Porter
Department of Maxillofacial Injury

Dear. M Porter

RE: Permission to Undertake Research on: Maxillofacial Injury- A Retrospective Analysis of Time Lapse Between Injury and Treatment.

Permission is granted for you to conduct the above research as described in your request provided:

1. Johannesburg hospital will not in anyway incur or inherit costs as a result of the said study.
2. Your study shall not disrupt services at the study sites.
3. Strict confidentiality shall be observed at all times.
4. Informed consent shall be solicited from patients participating in your study.

Please liaise with the Head of Department and Unit Manager or Sister in Charge to agree on the dates and time that would suit all parties.

Kindly forward this office with the results of your study on completion of the research.

I wish you success in your studies.

Yours sincerely

Sagie Pillay
Chief Executive Officer