Consent form

With this form a patient (or his/her relatives) gives his/her consent to the publication of personal information and/or images in an international medical journal.

Name and date of birth of the person described/depicted in the article:			
Top	oic of the article:		
Title of the article:			
Aut	hor / responsible person of the article:		
pub		y consent for the material about me / the patient to be edical publication. I have read the manuscript which will be	
lur	derstand the following:		
(1)	that complete anonymity cannot be	e material will be published without my / the patient's name attached, however I understand at complete anonymity cannot be guaranteed. It is possible that somebody somewhere – for ample, somebody who looked after me/the patient or a relative – may recognize me / the tient.	
(2) (3)	The text of the article will be edited for style, grammar and consistency before publication. The article may be published in a journal which is distributed worldwide. Scientific medical publications go mainly to doctors and other healthcare professionals but are also seen by many others including academics, students and journalists.		
(4)	Once published, the article will be placed on a scientific medical journal's website and may also be available on other websites.		
(5)	The article may also be used in full or in part in other publications and products published by the journal and/or by other publishers. This includes publication in English and in translation, in print, in digital formats, and in any other formats that may be used by the journal or other publishers now and in the future. The article may appear in local and worldwide editions of the journal.		
(6)	I can revoke my consent at any time before publication, but once the article has been committed to publication ("gone to press") it will not be possible to revoke the consent.		
 Pla	ce, date Signa	ature	