

## **Consent Form for Publication in a Bioscientifica Journal**

Article Title:	
Journal Title:	
Corresponding author:	
I understand that the information will be published without my/my child or ward's/my relative's (circle as appropriate) name attached, but that full anonymity cannot be guaranteed.	
I have seen and read the material to be published. I have discussed this consent form with:	
who is an author of this article, and understand that the text of the article may be edited for style, grammar, consistency, and length in the course of the review process.	
I understand that the text and any pictures or videos published in the article will be freely available on the internet and may be seen by the general public. The pictures, videos and text may also appear on other websites or in print, may be translated into other languages or used for commercial purposes. I understand that I will not receive payment or royalties for this material, and I do not have a claim on any possible future commercial uses of this content.	
I can revoke my consent at any time before publication, but once the Information has been committed to publication ("gone to press") it will not be possible to revoke the consent. Signing this consent form does not remove my rights to privacy.	
If other family members are referenced (eg in a family history) I confirm I have their consent also to publication.	
Signed:	Print Name:
Date:	
If you are giving your consent on behaperson:	alf of another person, please state your relationship to that
Relationship:	Patients Full Name:

Please complete this form, obtain the patient's signature, and file in case notes.

The manuscript reporting this patient's details should state that 'Written informed consent for publication of their clinical details and/or clinical images was obtained from the patient/parent/guardian/relative of the patient.'

A copy of the consent form should be made available for review by the Editor of this journal on request

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