Patient consent form

For a patient's consent to publication of information about them in the BMJ and in associated BMJ Publishing Group Ltd ("BMJ Group") publications and products. Please note that this form is also available in multiple languages.

Name of person described in article or shown in photograph: ISABELLA PURCELL

Subject matter of photograph or article: KEINÖLÖS DISEASE

BMJ manuscript number

Title of article

Corresponding author:

I, ISABELLA PURCELL, give my consent for this information about MYSELF/ MY CHILD OR WARD/ MY RELATIVE [circle correct description] relating to the subject matter above ("the information") to be published in the BMJ and in associated BMJ Publishing Group Ltd ("BMJ Group") publications and products.

I understand the following:

1. The information will be published without my name attached and the BMJ will make every attempt to ensure my anonymity. I understand, however, that complete anonymity cannot be guaranteed. It is possible that somebody somewhere — perhaps, for example, somebody who looked after me if I was in hospital or a relative — may identify me.

2. The text of the article will be edited for style, grammar, consistency, and length.

3. The information may be published in the weekly print BMJ, which is distributed worldwide. The journal goes mainly to doctors but is seen by many non-doctors, including journalists.

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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.

Signed: [Signature]

Date: 17th June 2013