

CONSENT FORM

Patient's consent to publication of information about them in a journal or thesis

Name of person described in article or shown in photograph: Mrs. Anita.

Title of article: Elizabethkingia Miricola: a rare nonfermenter causing urinary tract infection

I Mrs Anita D/o laxmi shankar. [full name] give my consent for this information about MYSELF OR ~~MY CHILD~~ OR ~~WARD/MY RELATIVE~~ [full name]: _____, relating to the subject matter above ("the Information") to appear in a journal article or to be used for the purpose of a thesis or presentation.

I understand the following:

1. The Information will be published without my name/child's name/relatives name attached and every attempt will be made to ensure anonymity.
2. The Information may be published in a journal which is read worldwide or an online journal. Journals are aimed mainly at health care professionals but may be seen by many non-doctors, including journalists.
3. The Information may be placed on a website.
4. I can withdraw my consent at any time before online publication, but once the Information has been committed to publication it will not be possible to withdraw the consent.
5. I gave my consent to publish my details.

Name: Mrs. Anita.

Date: 10/9/2016.

Signature

