

知情同意书

Informed consent

临床项目名称: 黛力新减轻 Jackhammer 食管症状一例

Name: Deanxit Relieves Symptoms in a Patient with Jackhammer Esophagus;
a case report

单位: 广西壮族自治区人民医院消化内科

Unit: Department of gastroenterology, People's Hospital of Guangxi
Zhuang Autonomous Region

同意声明 (Informed consent statement):

我已被告知此病例报道的目的、背景、过程、影响及获益等情况, 并获得保证不会公开可识别我的个人信息的任何资料。且我有足够的时间和机会就关于我的病例资料用于学术交流等相关事项进行提问, 问题的答复我很满意。

I have been told the aim, background, process, influence and benefits about the case report. And guaranteed not publicly any information can recognize my personal data. I also have enough time and opportunity to ask about my case for academic exchanges and other related matters, I am satisfied with the answers.

我决定同意授权我的主治医师公开发表关于我的病例资料, 用于学术研究和学术讨论。

I decided to agree my doctor to publish information about my case, used for academic research and discussion.

患者签名(signature): 黄炳元. Bingyu Huang

日期(date): 2017年6月18日

我已确认向患者解释了本次病例用于论文发表的详细情况, 包括保证他可识别个人信息得到保密, 及目的只用于学术交流。并给其一份签署过的知情同意书副本。

I have confirmed to the patient for the details of cases report, including the guarantee his personal information confidential, and used only for academic exchanges. And give the copy one to him.

医师签字(signature): 李强. Jinyang Li

日期: 2017年6月28日