

Patient Consent Form

To record a patient's consent to publication of information relating to them or a relative, in a Wiley publication.

Name of patient: Yu-bo Liu

Title of publication/product: Differentiation of Intrahepatic Cholangiocarcinoma from Hepatocellular Carcinoma in High-Risk Patients: A Predictive Model using Contrast-Enhanced Ultrasound

Principal author/editor: Wei Wang

Principal author/editor's address: 58 Zhongshan Road 2, Guangzhou, People's Republic of China.

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***In cases where the patient has died or is incapable of giving consent, consent may be given by the next of kin. If the patient is under the age of 16, consent should be given by a parent or guardian.

I understand that:

The information/video/photographic material will be used only in educational publications intended for health professionals

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- (2) If the publication or product is published on an open access basis, I understand that it may be accessed freely throughout the world.

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***SIGNATURE OF PATIENT/PARENT// GUARDIAN / NEXT OF KIN Yu Bo Liu.....

***IF PARENT / GUARDIAN / NEXT OF KIN, STATE RELATIONSHIP TO PATIENT.....

[ADDRESS] Dongchuang Road, Guangzhou, People's Republic of China

[DATE] March 22, 2013

SIGNATURE OF HEALTH PROFESSIONAL OBTAINING PERMISSION (IF APPROPRIATE)

.....

[ADDRESS]

[DATE]

Note to principal author: The original signed consent form should be retained by the principal author.

Note to health professional: In addition to the consent form, please ensure that any other necessary permissions are cleared for use of the information, including any permissions required for use of information contained in medical records.