

## CONSENT FORM FOR CASE REPORTS<sup>1</sup>

**For a patient's consent to publication of information about them in a journal or thesis**

Name of person described in article or shown in photograph: Sueko Okiyama

Subject matter of photograph or article: Her clinical case is described in article and her stomach is shown in photograph.

Title of article: A cut endotracheal tube for endoscopic removal of an ingested push-through pack

Medical practitioner or corresponding author: Yuki Tateno

I Sueko Okiyama [insert full name] give my consent for this information about MYSELF, relating to the subject matter above 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 attached and every attempt will be made to ensure 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 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.

Signed: Sueko Okiyama Date: Mar 1, 2016

Signature of requesting medical practitioner/health care worker:

Yuki Tateno Date: Mar. 1, 2016

<sup>1</sup> Adapted from *BMJ Case Reports* consent form  
Division Research Development and Support, Faculty of Health Sciences, Stellenbosch University, South Africa. Consent form for case reports. Version 1. Sept 2008.