

# Jiaxing Science and Technology Plan Project contract

(Research on technological innovation of people's  
livelihood )

Application number: 2020AY30017

Applicant: Jiaxing Second Hospital (Seal)



Project leader: Wang Xiaoguang

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Application date: 2020.07.02

Centralized management: Directly under the  
municipal government

Jiaxing Science and Technology Bureau  
2019 .07 .02



# Jiaxing Second Hospital Affiliated to Jiaxing University

## Informed consent for treatment

Patient name : Pan Jun gender: female age: 29 year old Admission number: 90634048

Condition and treatment recommendations:

Because the patient suffers from intra-abdominal accessory neuroma requiring surgical treatment, our hospital has the technical and equipment conditions to carry out this project, but there are still some risks and accidents. When risks and accidents occur, our hospital will actively deal with them in strict accordance with relevant regulations to minimize the extent of damage.

Medical statement:

I have told the patient about the treatment to be carried out, the possible complications and risks after this treatment, other possible treatment methods, and answered the patient's questions about this treatment.

Doctor's signature : Wei Guo

Date of signature:



Informed patient choice:

- ☒ 1 The doctor has informed me of the treatment I should take, the complications and risks that may occur after treatment, other possible treatment methods, and answered the questions about my treatment.
- ☒ 2 I agree that during treatment, the physician may make adjustments to the scheduled treatment according to my condition.
- ☒ 3 I was not promised 100 per cent success in my treatment.

Patient signature: Jun Pan

Date of signature: 2022.07.20

If the patient is unable to sign the informed consent, an authorized relative should sign here:

Signature of patient authorized person: \_\_\_\_\_

Relationship with patients: \_\_\_\_\_ Date of signature: \_\_\_\_\_