

PATIENT CONSENT FORM

**For patients' consent to publication of material about them in the scholarly journal titled:
*Prenatal Diagnosis***

Type and subject of material (please state intended use)

Photograph(s) (e.g., clinical image(s), histological slide(s))

.....

Case notes (e.g., single case report, part of a series)

.....

Other identifiable patient data (e.g., to be included in clinical trial report)

.....

Other patient data (specify)

.....

I give my consent for this material to appear in *Prenatal Diagnosis*. I have seen any photographic material to be published.

I understand the following:

- The material will be published without my name. Every effort will be made to ensure I cannot be identified, but my complete anonymity cannot be guaranteed.
- The material may be published in the monthly printed edition of *Prenatal Diagnosis*. Its subscribers and readers are not all medical professionals.
- If published in the printed edition of *Prenatal Diagnosis*, the same material will also be used in the electronic edition of the journal. This appears on the world wide web, but is not usually on a freely available web site which the general public may see. However, a few sample journal articles are made freely available from the web site from time to time.
- Photographic material may be used on the cover of the journal. The material will not be used out of context, e.g., for advertising or packaging other products.

I also give consent for the material to be used in other publications (including books, journals, CD-ROMs and online and Internet publications) that may approach *Prenatal Diagnosis* so long as the material is not used out of context. For example, photographs will not be used in advertising or packaging other products.

Name of patient

Name of doctor

.....

.....

Signed

Date

Signed

Date

.....

.....