## **Patient Consent form**

For a patient's consent to publication of images and/or information about them in Portuguese Kidney Journal (PKJ).

Name of patient:

Relationship to patient (if patient not signing this form):

Description of the photo, image, text or other material (Material) about the patient. A copy of the Material must be attached to this form:

Provisional title of article

## CONSENT

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me/the patient to appear in the PKJ publication.

give my consent for the Material about

I confirm that I: (please tick boxes to confirm)

have seen the photo, image, text or other material about me/the patient

have read the article to be submitted to PKJ

am legally entitled to give this consent.

Signed:

Print name:

Address:

Email address:

If signing on behalf of the patient, please give the reason why the patient can not consent for themselves (e.g. patient is under 18 or has cognitive or intellectual impairment).

