Patient Consent form for Infections in Children

Name of person described in	article or shown in photograph:
Subject matter of photograp	1 0 1
Title of article:	
Corresponding author:	
Ι	[insert full name] give my consent for
description] relating to the s	ELF/MY CHILD OR WARD/MY RELATIVE [circle correct bject matter above ("the Information") to appear in the journal I have seen and read the material to be submitted to the journal.
I understand the following:	
will make every attempt to anonymity cannot be guarar example, somebody who loe (2) The text of the article with (3) The Information may be journal goes mainly to docted	ublished without my name attached and Infections in Children asure my anonymity. I understand, however, that complete eed. It is possible that somebody somewhere - perhaps, for ked after me if I was in hospital or a relative - may identify me. I be edited for style, grammar, consistency, and length. Soublished in the journal, which is distributed worldwide. The est but is seen by many non-doctors, including journalists. The be placed on the journal website,
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