## **Consent form**

For a nationt's consent to	o publication of images an	d/or information	about them in	n BMJ publications.
For a nationt's consent to	n bublication of images an	g/or information	I about them i	, bittle production

Nam	e of patient:	KANDIAH PERASAMY			
Relationship to patient (if patient not					
signi	ng this form):				
Description of the photo, image, text or other material (Material) about the patient.  A copy of the Material should be attached					
	is form:	P			
Provisional title of article in which Material		Accordantal self-Injection of			
will	will be included: Yylazın during work				
CONSENT					
	n 引 PE 円 的 Am Y tient to appear in a BMJ publication.	[PRINT FULL NAME] give my consent for the Material about			
I confirm t	hat I: (please tick boxes to confirm)				
	have seen the photo, image, text or oth have read the article to be submitted to	er material about me/the patient BBMI			
	am legally entitled to give this consent.	,			
I understa	nd the following:				
(1)	The Material will be published without my/the patient's name attached, however I understand that				
(1)	complete anonymity cannot be guaranteed. It is possible that somebody somewhere - for example, somebody who looked after me/the patient or a relative - may recognise me/the patient.				
(2)	The Material may show or include details of my/the patient's medical condition or injury and any prognosis, treatment or surgery that I have/the patient has, had or may have in the future.				
(3)	The article may be published in a journal which is distributed worldwide. BMJ's publications go mainly to doctors and other healthcare professionals but are also seen by many others including academics, students and journalists.				
(4)	(4) The article, including the Material, may be the subject of a press release, and may be linked to from social media and/or used in other promotional activities. Once published, the article will be placed on a BMJ website and may also be available on other websites.				
(5)	The text of the article will be edited for	r style, grammar and consistency before publication.			
(6)	I/the patient will not receive any finan	cial benefit from publication of the article.			
1	and/or by other publishers. This include	n part in other publications and products published by BMJ publication in English and in translation, in print, in digital t may be used by BMJ or other publishers now and in the ditions of journals or other publications, published in the UK			
(8) I	can revoke my consent at any time bef publication ("gone to press") it will not	ore publication, but once the article has been committed to be possible to revoke the consent.			
(9) T	(9) This consent form will be retained securely and in confidence by BMJ in accordance with the law, for no longer than necessary.				
.D1 1 € coi	ntacting me, if necessary, in the future.				
ор	nere this consent relates to an article portunity to comment on the article lected in the article.	e in <i>BMJ Case Reports</i> , I have/the patient has had the and I am satisfied that the comments, if any, have been			
Signed	· ملاسمولا :	Print name: KAN OIAH PEMASAMY  1/c 500607-05-503  Email address:			
	Address: Email address: From 6 or 1 - 5 A 3				
Audies		Telephone no: 127 278			
If signing	g on behalf of the patient, please give the re d, under 18 or has cognitive or intellectual i	ason why the patient can't consent for themselves (e.g. patient is			
	la de la companya de	Date: 1/10/2017			
□ If y	ou are signing for a family or other group, oup have been informed.	please tick the box to confirm that all relevant members of the family or			