



# Scottish Society of Anaesthetists

## ***Consent/assent form for presentation or publication of information about a person***

I, .....

- consent to information relating to my care; or
- assent to information relating to the care of .....

to be submitted to the Scottish Society of Anaesthetists for presentation at a meeting and/or publication in the *Annals of the Society*.

- I have had the opportunity to see and read the information and/or images to be submitted
- I understand that:
  - The information will be presented/published without my/the person's name attached.
  - The final version of any published text may be edited for style.
  - The information may be available in the *Annals of the Society* or published online and may be seen by non-medical readers including members of the public.
  - I can withdraw my consent/assent at any time, but not after the time of presentation or publication.

Signed .....

Date .....