



2021 Case Report Contest

Client Informed Consent for Publication of Case Report Form

Case Report Title:

Author:

I, (Name of Client) confirm that:

- The therapist has informed me about the purpose of the case report, explained the procedures and course of treatment to me, asked me about my goals for treatment, and answered any questions to my satisfaction, and I agree to participate in the case study.
- I hereby give my consent for images and/or other clinical information (age, gender, health status relevant to treatment) relating to my case to be submitted as part of a case report in the Massage New Zealand (MNZ) Case Report Competition.
- I understand that my name, initials, protected health information such as identification numbers, contact details (address, phone numbers, email addresses) will not be published and that efforts will be made to conceal my identity, but that anonymity cannot be guaranteed.
- I understand that the material may be presented at an MNZ National Conference, published in MNZ Magazine and posted on the MNZ website. As a result, I understand that the material may be seen by the general public.

Signature of Client:

Date:

If you are unable to upload a digital signature, please fill in all the remaining fields before printing this document and adding the signature manually.

If you are not the client, what is your relationship to him or her?

NB: The person giving consent should be a substitute decision maker or legal guardian or should hold power of attorney for the client.

Name of signatory:

Why is the client not able to give written consent? (e.g. is the client a minor, or incapacitated?):

Use of images

If images of the client's face or distinctive body marking are to be published, the following section should be signed in addition to the above section:

I give permission for images of my face or distinctive body markings to be published and recognise that I might therefore be identifiable even though my name and initials will not be published.

Signature of Client:

Date:

If you are unable to upload a digital signature, please fill in all the remaining fields before printing this document and adding the signature manually.