



*Inside the Lives of Canada's Resident Doctors – Consent Form*

**Instructions:**

1. Download and complete this form for each individual you wish anonymized in your submission
2. Obtain all required signatures
3. Submit your form(s) with your editorial submission

**Title of Submission:**

**Author(s):**

Patients have the right to decline to sign this consent form (and therefore to not have their de-identified information included in the publication in any way). Declining to sign the form will not affect their care in any way.

I hereby give consent for information relating to my care to be reported in the RDoC publication *Inside the Lives of Canada's Resident Doctors*. I understand that my name and initials will not be published and that efforts to conceal my identity will be made; however, complete anonymity cannot be guaranteed.

I understand that this information may be published in the hard copy anthology, and/or on the RDoC website or other promotional materials and may be seen by the general public.

**Name of Patient:**

**Patient Date of Birth:**

**Signature of patient (or individual signing on behalf of the patient):**

**Date:**

**If you are not the patient, what is your relationship to them?**

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

**Why is the patient not able to give consent (i.e. are they a minor, incapacitated or deceased?):**

If you have questions or require clarification, please contact the Editorial Team at  
[submissions@residentdoctors.ca](mailto:submissions@residentdoctors.ca)