Consent Form

Patient's consent for the publication of information relating to them in a medical journal and associated publications

To be completed by the corresponding author:

Name of the person described in the article or shown in the photograph: <u>Ugwu Vincent</u>

The subject of the article or photograph: <u>Public Health</u>

Title of article: Case Report in the Use of Some Powdered Mixture as Tea during COVID-19 in Jos-Nigeria

Name of the corresponding author: Obeta Mark Uchejeso

Corresponding author's address: <u>Department of Medical Laboratory Management, FSMLS, Jos-</u><u>Nigeria</u>

To be completed by the patient/relative:

I <u>UGWU VINCENT</u> 44 years old and residing in Jos-Nigeria, here give my consent for this information about MYSELF relating to the subject matter ("the *Information*") above to appear in a medical journal and associated publications.

I have seen any pictures and read the material to be published.

I understand that:

- My name will not be published in the *Information*. I understand, however, that complete anonymity cannot be guaranteed. It is possible that somebody somewhere perhaps, for example, somebody who looked after me if I was in hospital or a relative may identify me.
- The text of the article may be edited for style, grammar, consistency and length.
- The *Information* may be published in a journal which is distributed worldwide.
- The *Information* may also be placed on the journal worldwide website. Both the printed version and the website are seen and read by doctors, journalists, and members of the public.
- The *Information* may also be used in full or in part by other related publications and products published by the journal.
- The *Information* will not be used for advertising or packaging.
- The *Information* will not be used out of context.
- I can revoke my consent at any time before publication, but once the *Information* has been committed to publication ("gone to press") it will not be possible to revoke the consent.

