



## Patient Consent Form

Anatolian Journal of Pharmaceutical Sciences (AJPS)

Title of the Manuscript:

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Corresponding Author:

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I hereby give my consent for my clinical data and relevant medical history to be published in the Anatolian Journal of Pharmaceutical Sciences (AJPS).

I understand that:

- My identity will remain confidential. No names, initials, or identifying images will be published without my explicit permission.
- The information may be published in print and online formats of the journal.
- I may withdraw this consent in writing before the article is published.

Patient/Representative Name: -----

Signature: -----

Date: -----

Relation to Patient (if applicable): -----