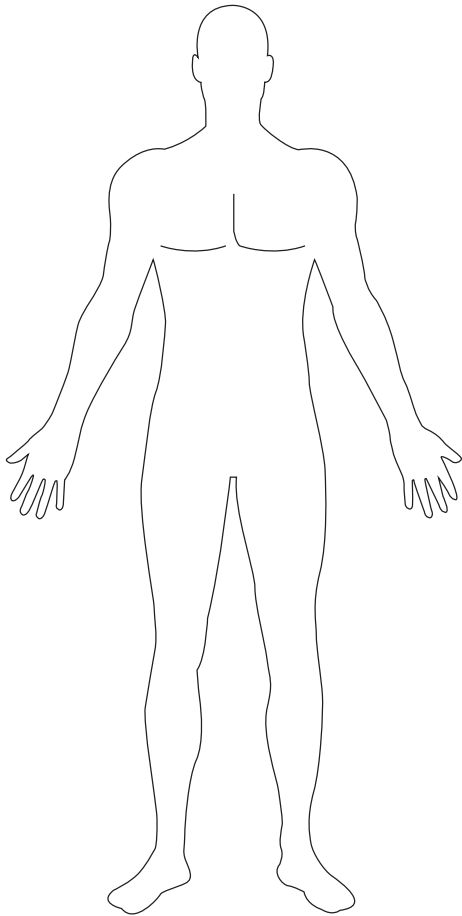


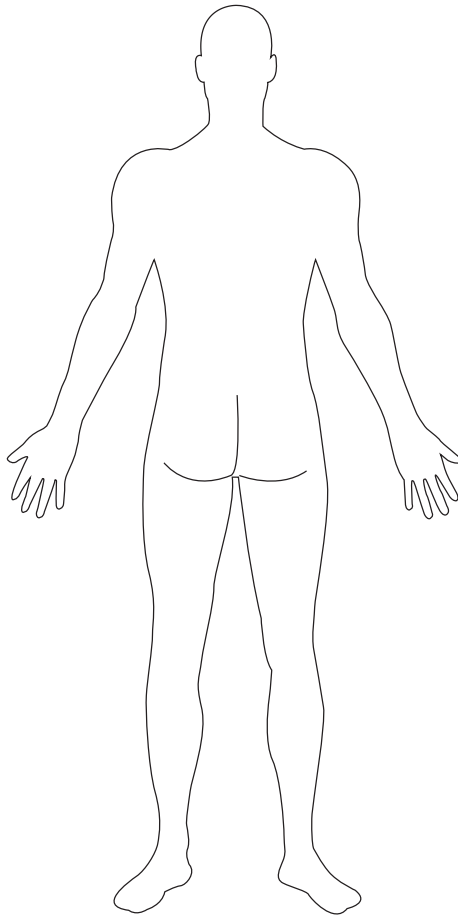


## Areas of concern

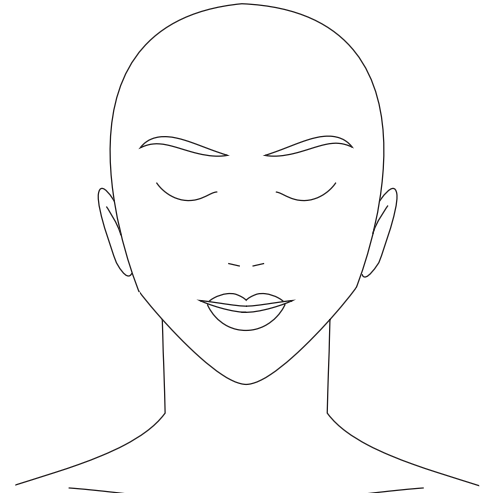
PLEASE INDICATE WITH AN 'X' ON THE DIAGRAM ANY AREAS OF CONCERN



Front



Back



Face

### PATIENT CONSENT

Australian Skin Cancer Clinics is owned and operated by Matrix Skin Cancer Clinics Pty Limited ("Matrix"). I understand that Matrix is committed to protecting the privacy of individuals and their personal information in accordance with the *Privacy Act 1988* (Cth). My signature below indicates that I consent to Matrix collecting, holding, using and disclosing my personal information that I provide to Matrix (now and in the future) for the purposes set out in Matrix's Privacy Policy, including but not limited to the provision of medical services and treatment to me, data research and analysis including conducting clinical trials and proactive screenings and for the purpose of sending me direct marketing communications in relation to these.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### CLINICAL PHOTOGRAPHY

Our Doctors / Nurses routinely take photographs as part of providing you with good medical care. They are part of your medical record. These photographs are not just a record of your condition, as they may also assist in determining the best treatments to offer you. This may require input from other expert doctors. Our Doctors / Nurses will discuss this with you when providing care and considering further treatments. Photographs from medical records may also be very helpful for other medical purposes, particularly education, publication or research. This is part of ensuring the medical care we provide to our patients continues to develop and improve.

We seek your consent to take and use the photographs in your medical record for the following purposes:

- Medical research and publications
- Educating other health professionals and medical students
- Educating other patients and community groups about skin cancer

If any photographs from your medical record are used for research, publication or education, they will be presented in such a way that you are not identified. If we believe that you may be identified from such a photograph, we will not use it without your further specific consent.

You can withdraw your consent at any time. However, photographs cannot be withdrawn once they have been published.

I have read the information on this page and consent to photographs being taken and used for the purposes listed above, and not for marketing purposes.

I acknowledge that ownership of my medical records, including photographs taken during consultations, are retained by Australian Skin Cancer Clinics and that I am not entitled to make claims of ownership in those photographs.

I agree  I do not agree

Signature: \_\_\_\_\_

Date: \_\_\_\_\_