## **Journal of Plastic and Reconstructive Surgery Patient's Consent for Publication of Facial Photographs**

Manuscript Title:		
I fully understand and agree that photograp	ph(s) of my face will be	included in the manuscript titled above and
that it will be published in the Journal of P	lastic and Reconstructive	Surgery (JPRS), the official online journal
published by the Japan Society of Plastic	and Reconstructive Surg	gery. I also understand that the JPRS is an
online open-access journal, which is freel	ly available to the public	and that anyone will be accessible to the
manuscript which includes a photograph o	f my face.	
I confirm that I received an explanation about	out the use of my facial p	hotograph(s) in the manuscript titled above,
the publication of the manuscript including	my facial photograph(s),	and the characteristics of the JPRS's online
distribution method by the author of the m	anuscript. The name of the	he author that gave the explanation is at the
bottom of this consent.		
Name of Patient (Print)	Signature	Date (MM/DD/YYYY)
If this form is signed by a person other tha Reason:		ain the reason and relationship:
Relationship to patient:		
Name of Personal Representative (Print)	Signature	Date (MM/DD/YYYY)
A. Author provided the explanation		
Name (Print)	Signature	Date (MM/DD/YYYY)
Affiliation:		
B. Corresponding Author (If different from A)		
Name (Print)	Signature	Date (MM/DD/YYYY)
Affiliation:		