

PATIENT CONSENT FORM

Patient consent in relation to:

Title of manuscript: **Pressure distribution analysis in three wheelchairs cushions of subjects with spinal cord injury**

Journal: **Disability and Rehabilitation**

I, the undersigned, give my consent for photograph(s) and/or case history ("Material") to be published in the above Journal and Article.

I confirm that I have seen and read both the Material and the Article (as attached) to be published by Taylor & Francis.

I have discussed this consent form with **Paulo Vinicius Braga Mendes**, who is an author of this paper, and I understand that all Taylor & Francis journals may be available in both print and on the internet, and will be available to subscribers and sometimes a broader audience through marketing channels and other third parties. Therefore, anyone can read material published in the Journal. Readers may include not only doctors and researchers but also journalists and members of the public.

Patient name Luciene Gomes

Signed by 

NOTE: *If the patient is less than 18 years of age, this must be signed by their parent or legal guardian.*
NOTE: *If the patient is deceased, this must be signed by their next of kin.*

Date _____

Signed _____

Relationship to patient, if applicable: _____

Author name Paulo Vinicius Braga Mendes (please print)

Date 09/05/2017

Signed  _____

Author: Please complete this form and obtain the patient's signature, and keep a copy on record. The manuscript reporting the patient's details should state that consent to publication was obtained from the patient, and uploaded with your manuscript when prompted by the journal submission requirements.

