

CP18 V5

Clinical Photography, Video and Audio Recordings

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1.0 Policy Statement (Purpose / Objectives of the policy)

- 1.1 This Policy replaces any previous version.
- 1.2 All clinical photography, video recording or sound recording undertaken within the Trust is subject to current legislation and guidance, which provides the patient with rights of confidentiality, protection against the unlawful processing of data and the right of consent.
- 1.3 Any person or project undertaking photography, video capture or voice recording of a patient does so on the understanding that all images, videos and sound tracks produced will be regarded as medical records and are therefore entitled to the same degree of protection and that the misuse of such images or recordings could lead to litigation for breach of confidentiality.
- 1.4 The Royal Wolverhampton NHS Trust is committed to ensuring that all photography, video capture and sound recordings undertaken on its premises and of its patients conform to current legislation.
- 1.5 Clinical photography, video and audio recordings must only be captured on cameras and devices registered with Clinical Illustration or on Trust supplied and managed mobile devices using the Clinical Uploader application. No other device must be used.
- 1.6 This policy is not intended to be over-restrictive but aims to make all The Royal Wolverhampton NHS Trust employees, contractors or guests aware of their responsibilities when undertaking any form of photography, particularly clinical photography, video recording or sound recording during the course of their duties.
- 1.7 Clinical photography plays an important role in documenting patient conditions and response to treatment.
This policy recognises the essential role of photographic material within a teaching Trust for the benefit it brings to patients through the better education of its staff. In this respect, it recognises the need for continued use of materials already in existence within the teaching domain prior to the implementation of this policy.

2.0 Definitions

- 2.1** Photography - will refer to an image created by the use of conventional still, digital or video cameras or photographic image scanning devices.
A child – is a person who has not attained their 18th birthday; a young person is between 16 and 18 years, and a child is younger than 16. The law recognises the assumption of capacity to consent for anyone of 16 years or above.

3.0 Accountabilities

- 3.1** Chief Medical Officer. To ensure that the policy is reviewed in advance of the review date. To manage the effective withdrawal of the policy if appropriate.
- 3.2** Head of Clinical Illustration. To develop and review the policy, provide secure storage and access for clinical images and recordings by approved users.
- 3.2.1** Any complaint made relevant to this policy should be considered at the time of its review.
- 3.2.2** To format and maintain a Trust register of approved parties and projects who undertake patient photography or video or sound recordings, and ensure that they store clinical digital images within the RWT image management system see 4.1.2.
- 3.2.3** To provide advice and guidance on issues pertaining to clinical photography, video recordings and sound recordings as required.
- 3.2.4** To make all new Trust employees aware of and understand this policy through Trust Induction.
- 3.3** Information Governance Manager. To provide expert advice and guidance on Data Protection and computer security.
- 3.4** Caldicott Guardian. To provide expert advice and guidance on Caldicott principles relating to this policy.
- 3.5** Deputy Chief Operating Officers, Directorate Managers, and Divisional Medical and Clinical Directors. To ensure effective distribution and communication of the policy throughout their division and ensure the policy is implemented and adhered to within their division.
- 3.6** Ward and Departmental Managers. To notify all new and existing staff of this policy. Temporary staff must undertake “Quick Induction” on the KITE area of the intranet.
- 3.6.1** To ensure that all staff, contractors and other persons affected by the policy comply with its actions.
- 3.6.2** To provide information on the location of cameras used for patient photography and the location of stored images to the Head of Clinical Illustration. This data is to be stored in the Departmental Inventory located in Clinical Illustration Department.
Please note: it is not necessary to include cameras that form part of a medical device or C.C.T.V. e.g., endoscopes; laparoscopic, thoracoscopic and robotic cameras; fundus cameras, or security cameras.
- 3.7** Individual Trust Staff. To familiarise themselves and to comply with the policy relevant to their role and responsibilities

4.0 Policy Detail General

- 4.1 All parties or projects involved with the photography of patients must be approved by the Chief Medical Officer or Head of Clinical Illustration and recorded within the Clinical Illustration Department register (3.6.2).
- 4.1.2 In all cases where practically possible, images and recordings must be stored securely within the RWT image management system. All associated quality control and governance processes must be followed. Only Clinical Illustration staff will be used when there is a need for patient photography or video recording unless agreed with the Head of Clinical Illustration and a registered camera is in place for this process.
- 4.1.3 Audio recordings, video or photography of patients must not under any circumstances be undertaken using personal equipment. Only equipment supplied by RWT for legitimate reasons that transfers images into the Clinical Image workflow must be used.
- 4.1.4 In the case of 'urgent' photographs being requested 'out of hours', please call switchboard to contact the Clinical Photographer on call. For guidance of requests that are considered urgent please see [Appendix 1](#).
- 4.1.5 There must be a fully justifiable purpose for photography, video recording or sound recording to be carried out, e.g., for clinical record, teaching, research or audit purposes.
- 4.1.6 All parties and projects undertaking patient photography, video recording or sound recording must respect the dignity, religion, nationality and individual sensibilities of the patient.
- 4.1.7 All parties and projects undertaking patient photography, video recording or sound recording must be aware of and act appropriately upon the need for chaperones (CP36 Chaperoning of patients and clients).

Consent and use

- 4.2 The basis of data processing and consent is the GDPR regulations Article 6(1)(a), 6(1)e and 9(2)h. All requests for clinical photography or video or sound recordings must be submitted to the Department of Clinical Illustration using the e-referral system via the ClinicalWeb Portal [CWP], if a photographer is required to attend urgently, please telephone ext. 85377 to make arrangements after submitting the referral. See [appendix 2](#).
- 4.2.1 The requesting clinician must give the patient a full explanation of why the photographs or recordings are being requested and how and where they will be used.

4.2.2 The level of consent gained by the requesting clinician should be documented on the clinical photography e-Referral. The attending Clinical Photographer will confirm that informed consent has been given by the patient or legal guardian and will record a signature for consent A, B, C or D on an electronic signature capture device, which will be stored in the Clinical Illustration patient database. A suitable entry must be made in the patient's notes indicating that photographs, recordings have been requested or taken. The level of consent must be indicated. Should consent not be obtained by the clinician, the photographer will ask for consent for Type B, restricted educational use.

The consent levels for clinical photographs and recordings are:

Type A: Publication,

Type B: Restricted Educational,

Type C: Patient Record, and

Type D: Personal Memento.

4.2.3 Photographs and recordings must only be used for the original purpose for which consent was granted, unless Type A or B is obtained retrospectively.

4.2.4 Clinical photographs and recordings play a key role in the education of medical staff at all levels and thus benefit future patients. The standard consent requested by this hospital for Clinical Photography is Type B. For further information on consent issues consult Trust Policy [CP06, Consent to Treatment and Investigation Policy](#).

4.2.5 In exceptional cases where written consent is unobtainable, verbal consent is acceptable providing the process is witnessed and documented in the patient's notes or recorded using the eMI audio consent process.

4.2.6 In cases where a patient's mental capacity to consent is in question (images or recordings taken in the patient's best interests) or the patient is a vulnerable adult, please refer to Trust policy [CP53 Safeguarding Adults](#) for guidance.

4.2.7 Only in very exceptional circumstances where photographic evidence or video or sound recordings can be demonstrated to be beneficial to a patient's welfare or are required for legal documentation, consent authorised by the patient's consultant or senior nurse is acceptable. Examples of such instances are:

Suspected non-accidental injury to a child,

Visual evidence for legal reasons,

Persons obtaining treatment under false pretences, and

Deceased patients whose next of kin is not known.

This list is not exhaustive but it must be remembered that in all cases, photography and video and sound recordings must be documented in the same way as specified in section 4.2. For further information on consent issues consult Trust policy [CP06 Consent Policy](#).

4.2.8 Photographs and recordings that can identify a patient must only be used for training or publication if absolutely necessary e.g., if anonymity will devalue the use of an image in demonstrating a clinical feature or condition.

Note: the use of black bands across the eyes in facial views is not regarded as sufficient means to conceal identity. Other clues to the patient's identity (e.g., dates) must be removed from the images or recordings where they are not necessary.

- 4.2.9 If no level of consent is select by the requester, then Type B (Restricted Educational Use) consent will be sought. In exceptional cases where written consent is unobtainable, verbal consent is acceptable, providing it is witnessed and documented in the eReferral (see 4.2.6). If not, consent will default to type C. For further information on consent issues consult Trust policy [CP06 Consent Policy](#).
- 4.2.10 Consent is required even when the patient is incidental to the main picture, e.g., documentation of equipment or procedures.
- 4.2.11 Written consent from someone with parental responsibility (see [CP06](#)) must always be obtained when undertaking clinical photography or video or sound recordings of children under the age of 16, Photography and recording of children must only ever be carried out by the following:
Registered Clinical Photographers,
Senior Medical Staff, or
Scene of Crime Officers (Police).
- 4.2.12 In the case of an unconscious patient, photographs or recordings may be taken but must not be released until informed consent has been obtained retrospectively. The patient must be aware that photographs or recordings have already been taken and told the reason why they were taken. If consent is not forthcoming digital image consent will default to type C.
- 4.2.13 Photographs of still-births and post-natal infant deaths for grieving purposes must have parental consent, and photographs taken for families of patients on the Swan program must have consent, Type D consent, from the patient's next of kin. It must be remembered that in such circumstances the situation must be handled with sensitivity and respect.
- 4.2.14 Consent to photography in the Operating Theatre is covered in the *Patient agreement to investigation or treatment* ([CP06](#)); this covers type C consent. Type A or B retrospective consent must be sought if identifiable images are to be used in a teaching or publication forum.
- 4.2.15 Where photography forms part of a clinical procedure (e.g., endoscopy), consent to the procedure provides consent to photography for the purposes of the patient record (consent Type C).
- 4.2.16 For images with type A or B consent, a patient, or next of kin of a deceased patient, has the right to withdraw consent at any time by writing to the Chief Executive of the Trust.

Educational, publishing, use

- 4.2.17 Photographic material for which there is no consent (e.g., material already in the teaching domain prior to the enactment of this policy) may be used for restricted teaching purposes, Type B consent if the following conditions are true:

The patient is not identifiable, and.

Appropriate attempts have been made to obtain retrospective consent.

Where there is doubt concerning whether images should continue to be used, the Caldicott Guardian or Legal department must be consulted.

- 4.2.18 In cases where a patient dies before consent is obtained, and images are considered essential to illustrate the cause of death to healthcare professionals, appropriate retrospective consent must be obtained from next of kin or representative with Power of Attorney.
- 4.2.19 Where pursuance of consent from grieving relatives is inappropriate, the image must only be used for the patient record ([Appendix 1](#), Type C).
- 4.2.20 The following types of images are exempt from the restrictions contained in this policy regarding consent Type A and B, (see 4.2) as they are deemed non- identifiable if all patient identifiable details are removed before use (i.e. name, date of birth, hospital number, NHS number etc).

Consent to make the recordings listed below will be implicit in the consent given to the investigation or treatment, and does not need to be obtained separately.

Radiological images (including MRI, CT, ultrasound).

Macro/micro photography of pathological specimens.

Ophthalmic photography.,

Images of internal organs or structures.

Laparoscopic and endoscopic images.

Images of pathology slides.

Recordings of organ functions.

- 4.3 The Trust recognises that on special occasions patients and their families may wish to photograph or video themselves whilst in hospital. The BMA is in support of patients taking photos/recordings of consultations as there is significant benefit for both patients and doctors supporting consensual recordings. The Trust endorses this and supports these wishes. However, we must take into consideration the needs and feelings of other patients and staff. All patients have privacy rights and no recording of other patients or staff must be made without explicit consent. Further details can be found: <https://www.bma.org.uk/advice-and-support/ethics/confidentiality-and-health-records/patients-recording-consultations>
- 4.3.1 Families must only take images of their relatives, and be aware that photographs or recordings cannot include other patients or visitors or staff or parts thereof that may be identifiable. Neither should any individual identifiable information [names, labels, signs, personalised items etc.] be included in any photograph or recording.
- 4.3.2 To ensure we comply with the law, members of the public recording images or capturing sound recordings against the Trust's advice or without appropriate consent may be liable to prosecution.
- 4.3.3 Birth partners must be informed that continuous video recording during the birth is only allowed with consent of all staff involved, any recordings or photographs must be for personal use only and not shared on publicly accessible platforms. It is essential that consent from anyone who may be recorded is gained prior to any photography or video recording taking place.

Copyright

- 4.3.4 Anyone undertaking photography on behalf of the Trust in Trust-employed time must be aware that, since the Copyright, Designs and Patents Act of 1988, full copyright and reproduction rights have been assigned to the Trust.
- 4.3.5 Contracts with publishers and freelance organisations must be made so that the copyright and reproduction rights of all photographs and video recordings are assigned to and remain with The Royal Wolverhampton NHS Trust.
- 4.3.6 Professional freelance photographers commissioned by the Trust must be made aware of patient confidentiality, associated rights and agree to adhere to trust policy.
- 4.3.7 All images, when published (e.g., digital images on a web site), should be accompanied with a copyright statement assigning copyright to the Trust and displaying the conventional copyright symbol i.e., © Royal Wolverhampton NHS Trust. Legally, the copyright symbol does not have to be present for copyright to exist. However, for clarity and ease of copyright assignment identification a copyright statement must be provided.
- 4.4 In cases of extreme urgency, an emergency use only camera is located in Nucleus Theatres recovery area. Access is restricted and gained via the senior member of staff in that area. All images captured are sent via Wi-Fi to the Clinical Illustration server, where they will be processed by staff the next working day. Guidance on use and the process for patient identification and consent is stored with the camera. A log book is also with the camera that should be filled in every time the camera is used. Consent forms WCA1086 should also be used (see [Appendix 3](#)).
- 4.4.1 Photographs taken with managed cameras, e.g., by Community Nurses and outpatients departments, must only be used after staff training given by Clinical Illustration and only with the equipment supplied in compliance with the local Standard Operational Procedure. Where images or recordings are captured by health care staff, consideration should be given to ensure any individual identifiable information [names, labels, signs, personalised items etc] are not included in any photograph or recording It is the responsibility of the person taking the photographs to ensure images have transferred to Clinical Illustration.
- 4.4.2 Photographs will be quality assured by Clinical Illustration and uploaded to the Clinical Web Portal. Images that do not meet the required standard will be referred back to the departmental lead for remedial action.

Retention and storage

- 4.4.3 No photograph, video or digital image will be kept for longer than is necessary unless Type A or B consent is obtained. Images will be retained for 8 years after the last episode of photography or in the case of a child, until the age of 25 years. Except in Child Sex Abuse cases where images will be retained until any enquiry is concluded.
- 4.4.4 Confidentiality must be respected after a patient's death.
- 4.4.5 To ensure an effective audit trail, all patient photographs and recordings must be stored on an approved secure hospital computer system (see 4.1.2) using the patient's unique identifying number or hospital number and a database maintained of all patients photographed. This information will be processed by the Clinical Illustration Department.
- 4.4.6 Images and recordings must be downloaded and stored safely to prevent accidental loss, unauthorized viewing or damage. In this respect, all parties must be aware that digital images are treated with the same level of security and confidentiality as medical photographs and slides.

- 4.4.7 Any image used for teaching within RWT must be consented to type B Restricted educational use. Any image or recording required for teaching outside of RWT must have type A publication consent and the use, publication, organisation or publication platform must be made clear before consent is sought. Any images/recordings used for this purpose must be anonymised and transferred using a secure process.
- 4.4.8 Clinical images or recordings must not be downloaded on to personal laptops, computers tablets, mobile phones or any other portable media for storage as these are inherently insecure. Anonymous images can only be put onto these devices for teaching presentations. All patient images must be removed from these devices after use (see Trust's [IT Security policy OP12](#)).
- 4.4.9 Clinical photographic material or digital images must not be processed by commercial laboratories or agencies that have not been approved by the Trust. All photographic material and image files must be sent to the Clinical Illustration department for processing.
- 4.5 Where possible, all clinical digital images and recordings will be stored in their original format without manipulation to preserve their integrity. Proof of the integrity of the original may be required, for example, where photographic evidence is required in a court case.
- 4.6 All personal data associated with photographic images and recordings must be retained so that it conforms to the standards stipulated by the Data Protection Act 1998 and General Data Protection Regulation 2018.
- 4.7 Any photographic material or recordings that are no longer required must be destroyed or securely erased along with its associated data, in accordance with current Trust practices. See The Royal Wolverhampton NHS Trust [Health Records Policy \(OP 07\)](#).
- 4.8 It is prohibited to lend, sell or hire any photographic image or recording to external bodies without permission. In this respect, all staff are reminded that breach of Copyright is a criminal offence. It is important to remember that simply being in possession of material that has been reproduced without consent is an offence.
- Note that passing of material to colleagues for internal use (e.g., for use in seminars, presentations, the Trust Intranet etc.) is permitted only with appropriate consent.
- 4.9 Misuse of any photographic image or recording will be considered a breach of this policy and will result in Trust disciplinary procedure.
- 4.10 Failure to comply with current UK legislation with regard to Data Protection Act 2018, is an offence and is punishable by law.

5.0 Financial Risk Assessment

1	Does the implementation of this policy require any additional Capital resources	No
2	Does the implementation of this policy require additional revenue resources	No
3	Does the implementation of this policy require additional manpower	No
4	Does the implementation of this policy release any manpower costs through a change in practice	No
5	Are there additional staff training costs associated with implementing this policy which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments	

6.0 Equality Impact Assessment

Completed September 2022.

7.0 Maintenance

Head of Clinical Illustration. To develop and review the policy.

8.0 Communication and Training

Awareness session for new starters on Trust induction. Notification of policy availability on Trust Intranet. One to one training and guidance to users as necessary.

9.0 Audit Process

Criterion	Lead	Monitoring method	Frequency	Committee
Compliance to policy, regarding use of emergency cameras when clinical photographers are available.	N Beardsmore	Notification from staff or use of cameras where when clinical photographer available	Whenever an emergency camera is used	Discuss with Medical Director
Consent process has been followed when undertaking clinical photography	N Beardsmore Imaging Technician or Clinical Photographer	Every patient photograph level of consent is checked before being uploaded onto the Clinical web Portal or before printing.	Daily. Every patient request.	Monthly departmental performance & governance review.
Include review of records held and that they have been destroyed appropriately 4.7	N Beardsmore Imaging Technician or Clinical Photographer	Visual compliance check when patient files are created on the Medical Illustration server by Imaging Technician or Clinical Photographer	Annual review	Departmental archive process

10.0 References - Legal, professional or national guidelines.

Data Protection Act (2018)
 Protection of Children Act (1999)
 MentalHealth Act (1983)
 Disability Discriminations Act (2005)
 Obscene Publications Act (1964)
 Copyright, Designs & Patents Act (1998)
 Professions Supplementary to Medicine Act (1960, extended 1997, 2001)
 Institute of Medical Illustrators Code of Conduct (June 2008)
 Institute of Medical Illustrators Confidentiality and Consent (May 2020)
 Clinical Negligence Scheme for Trusts (CNST 1996)
 General Data Protection Regulation (2018)
 Making and using visual and audit recordings of patients. (GMC 2013)
 Records Management Code of Practice (NHSX 2021)
 Guide to UK General Data Protection (ICO 2018)
 NHS Records Management Code of Practice (2021)
 Patients recording consultations (BMA 2021)

11.0 Attachments and Appendices

[Appendix 1 – Clinical Photography On call](#)
[Appendix 2 – Requesting Clinical Photographs](#)
[Appendix 3 – Consent form](#)

Document Control

Policy number and Policy CP18 version: V5	Policy Title Clinical Photography, Video and Audio Recordings	Status: Final		Author: Head of Clinical Illustration Director Sponsor: Chief Medical Officer
Version / Amendment History	Version	Date	Author	Reason
	V1	April 06	N Beardsmore	New policy
	V2	April 08	N Beardsmore	Update
	V3	February 12	N Beardsmore	Update
	V4	April 19	N Beardsmore	Update
	V5	July 22	N Beardsmore	Update
Intended Recipients: All clinical staff				
Consultation Group / Role Titles and Date:				
Name and date of Trust level group where reviewed		Trust Policy Group – September 2022		
Name and date of final approval committee		Trust Management Committee – September 2022		
Date of Policy issue		October 2022		
Review Date and Frequency (standard review frequency is 3 yearly unless otherwise indicated)		September 2025		
Training and Dissemination: Induction and Intranet				
To be read in conjunction with: NA				
Initial Equality Impact Assessment(all policies): Completed Yes / No Full Equality Impact assessment (as required): Completed Yes / No / NA If you require this document in an alternative format e.g., larger print please contact Policy Administrator 8904				
Monitoring arrangements and Committee		Departmental monitoring and governance process.		
Document summary/key issues covered. Clinical Photography, Video and Audio Recordings of patients				
Key words for intranet searching purposes		Clinical Photography, Video and Audio Recordings		

IMPLEMENTATION PLAN

To be completed when submitted to the appropriate committee for consideration/approval

Policy number and policy version	Clinical Photography, Video and Audio Recordings	CP18 V5
Reviewing Group	Policy Group	Date reviewed:
Implementation lead: Nigel Beardsmore nigel.beardsmore@nhs.net		
Implementation Issue to be considered (add additional issues where necessary)	Action Summary	Action lead / s (Timescale for completion)
Strategy; Consider (if appropriate) 1. Development of a pocket guide of strategy aims for staff 2. Include responsibilities of staff in relation to strategy in pocket guide.	Covered in Junior Doctors Handbook	
Training; Consider 1. Mandatory training approval process 2. Completion of mandatory training form	Covered in mandatory training	
Development of Forms, leaflets etc; Consider 1. Any forms developed for use and retention within the clinical record MUST be approved by Health Records Group prior to roll out. 2. Type, quantity required, where they will be kept / accessed/stored when completed	N/A	
Strategy / Policy / Procedure communication; Consider 1. Key communication messages from the policy / procedure, who to and how?	Minor updates to existing policy.	
Financial cost implementation Consider Business case development	N/A	
Other specific Policy issues / actions as required e.g., Risks of failure to implement, gaps or barriers to implementation		

Appendix 1

Level	Time to call	Reason
 4	Any time	Wounds or skin changes related to safeguarding investigation. If in doubt seek advice from senior nurse. Wounds related to police investigation. Multiple serious injuries. Emergency surgery prior to primary closure. Extravasation.
 3	Within 24 hours of admission / identification, between 08:30 - 17:00 hours. At weekends consider if the image can wait until the following Monday.	Grade 3,4 pressure ulcers, Infected surgical wound, Acute cellulitis Burns, Trauma wound following an incident or Pressure ulcers prior to discharge Please see note Discharge Planning below.
 2	Within 48 hours of admission / identification, between 08:30 - 17:00 hours. At weekends consider if the image can wait until the following Monday.	Grade 2 pressure ulcers
 1	Within 72 hours between 08:30 - 17:00 hours Monday- Friday	Dermatological condition, Fungating wound, Malignant wound, Lymphoedema or Leg ulceration

Where possible coordinate as many patients on your ward, if they have indications stated above, so they can be photographed at a similar time.

Clinical Photography - On call

Clinical Illustration request for wound photography pathway

Photography is a useful tool to monitor wound healing, but not all wounds need to be photographed urgently. To ensure images are taken at the appropriate time, please consider the following; try and coordinate the time a specialist is due to assess, cover the wound with a temporary dressing if expecting the Clinical Illustration Team, rearrange another day if the dressing needs to remain in place a number of days.

On Call Clinical Photographer

An on call clinical photographer is available via switchboard. This is for level 4 cases described in the table overleaf, plus safeguarding cases involving children, child abuse, suspected NAI and serious injuries or emergencies where clinical photographs will be of benefit to the treatment and care of a patient.

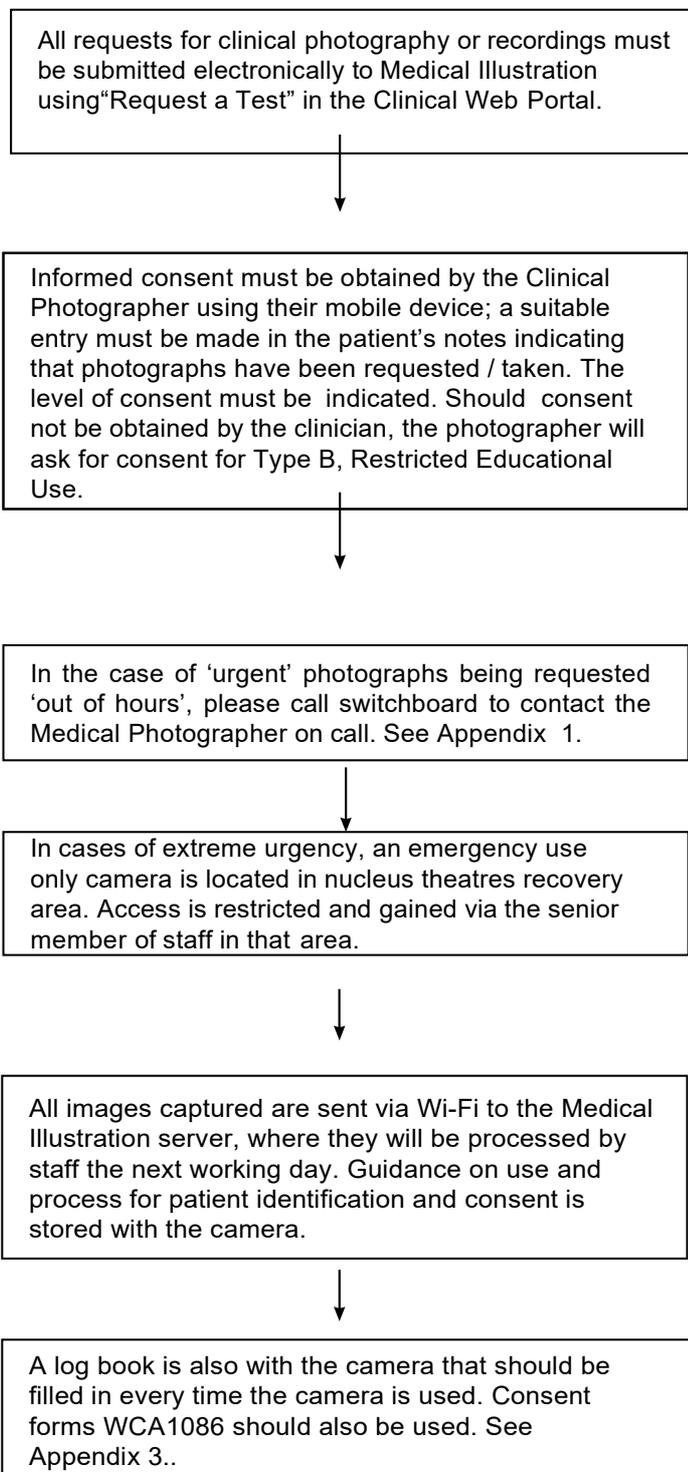
Discharge planning for patients with pressure ulcers

If a patient has a grade 2, 3 or pressure ulcer, ideally a photograph should be taken up to 24 hours prior to discharge. Planning ahead is vital. For urgent discharges, photography may not be possible and should not delay discharge, therefore document when it is not possible. See overleaf for our guide.

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Appendix 2

Requesting Clinical Photographs



Appendix 3

Clinical Illustration Request Clinical Illustration Department Extension 5377

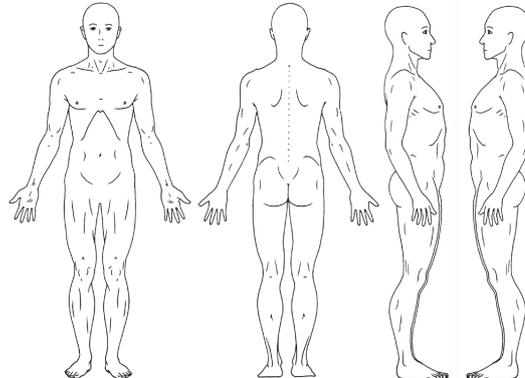


The Royal Wolverhampton
NHS Trust

Ward / Dept: Photograph to show: (see diagram below) Diagnosis:	Surname Unit No Forename Address DOB Postcode (or affix patient label)
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Requested by: (please print) Signature:
 Date: DD / MM / YY

Consultant: (please print) Signature:
 Date: DD / MM / YY

Photograph to show 	Please Indicate: Digital File <input type="checkbox"/> Prints <input type="checkbox"/> Video <input type="checkbox"/> Previously photographed? Yes <input type="checkbox"/> No <input type="checkbox"/> Pressure Sore Yes <input type="checkbox"/> No <input type="checkbox"/> Grade:
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Patient Consent

Informed Patient Consent to Clinical Photography / Video / Audio recording

Clinical illustration plays a key role in the education of medical staff at all levels and thus benefit future patients. The standard consent requested by this hospital is therefore “**Type B**”: Restricted Educational Use. If you do not fully understand any of the below, please ask. If, in the future, you wish to withdraw this consent, you have the right to do so at any time by writing to the Trust. Your choice of consent level will not affect your treatment within this Trust in any way.

A	Consent Type A: Publication Yes <input type="checkbox"/> No <input type="checkbox"/> I understand the images / video / audio recordings requested are required for publication in a journal / online / internet which may be seen by members of the general public as well as medical professionals. A Healthcare Professional will contact you at a later date with specific publication details. To this I give my consent. Signature: Print: Date:
B	Consent Type B: Restricted Educational Use Yes <input type="checkbox"/> No <input type="checkbox"/> I understand the images / video / audio recordings requested may be useful for the purposes of medical teaching and research and in view of the explanation given to me, I agree the illustration may be shown to appropriate professional staff. To this I give my consent. Signature: Print: Date:
C	Consent Type C: Patient Record Yes <input type="checkbox"/> No <input type="checkbox"/> I understand the illustrations requested and following the explanation given, will form part of my confidential treatment records. To this I give my consent. Signature: Print: Date:
D	Consent Type D: Personal Memento Yes <input type="checkbox"/> No <input type="checkbox"/> Images requested are for personal memento. To this I give my consent. Signature: Print: Date:

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