

CONSENT BY PARENT OR GUARDIAN
FORM II. OPERATIONS ON CHILDREN

EASTERN HEALTH & SOCIAL SERVICES BOARD

DISTRICT
HOSPITAL
ROYAL BELFAST
FOR SICK CHILDREN

Patient's Name ADAM STRAIN

I DEBRA STRAIN of

the parent/guardian of the above-named, hereby consent to the submission of my child to the operation of oesophagostomy & hydrocoelostomy the nature and purpose of which have been explained to me by DR./MR. W. Wark

I also consent to such further or alternative operative measures as may be found to be necessary during the course of the operation and to the administration of a general, local or other anaesthetic for any of these purposes.
* No assurance has been given to me that the operation will be performed by any particular surgeon.

Date 26/2/52 Signed Debra Strain
(Parent/Guardian)

I confirm that I have explained to the child's parent/guardian the nature and purpose of this operation.

Date 26/2/52 Signed E. Wark

* This sentence should be deleted in the case of the private patient.

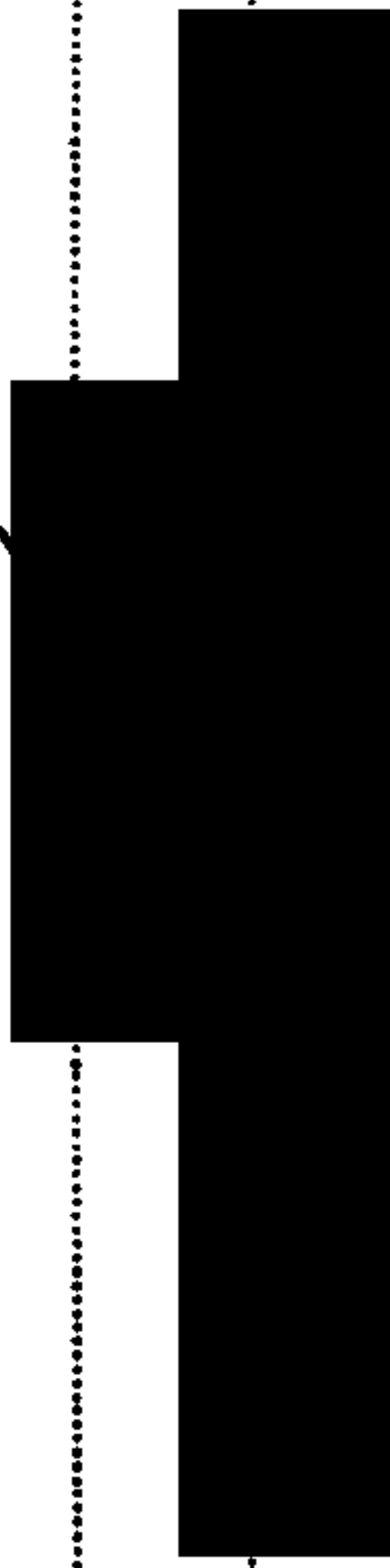
CONSENT BY PARENT OR GUARDIAN
FORM II. OPERATIONS ON CHILDREN

EASTERN HEALTH & SOCIAL SERVICES BOARD

DISTRICT
HOSPITAL
RBHSC

Patient's Name Adam Strain

I Debra Strain of



the parent/guardian of the above-named, hereby consent to the submission of my child to the operation of removal of supra-pubic catheter & insertion of new supra-pubic catheter the nature and purpose of which have been explained to me by DR./MR. Crain

I also consent to such further or alternative operative measures as may be found to be necessary during the course of the operation and to the administration of a general, local or other anaesthetic for any of these purposes.

* No assurance has been given to me that the operation will be performed by any particular surgeon.

Date 21/1/52 Signed Debra Strain
(Parent/Guardian)

I confirm that I have explained to the child's parent/guardian the nature and purpose of this operation.

Date 27/1/52 Signed Crain

* This sentence should be deleted in the case of the private patient.