

# Informed Consent

**Study name:**

*A Mixed Form of Sex Cord-Stromal Tumor (Gynandroblastoma) with Malignant Morphology and Behavior Involving Both Ovaries having Metachronous Presentation in a 15 year old female patient: A case report*

**Purpose of the study:** clinical case report through clinical history, physical examination, laboratory and pictures

**Benefits:** The publication of case reports help to increase information and knowledge about the disease and therefore provides improved understanding of the disease and its treatment.

I, the undersigned, hereby grant permission, from this date forward, to use and disclose the information about myself (or about the person under my legal care) for the purposes of the study identified above. I furthermore acknowledge that:

1. I have read this consent form and authorization and was given the opportunity to ask questions and receive answers regarding the study.
2. I have agreed to take part in this study as a research participant.

  
\_\_\_\_\_  
Name and signature of the Participant

Date and Place

*7. Mar .2022 , Amman . Jordan*  
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