



HOSPITAL SULTAN ABDUL AZIZ SHAH
UNIVERSITI PUTRA MALAYSIA
Kod Dokumen: HSAAS/FAR/BR219

CONSENT FORM
MEDICATION THERAPY ADHERENCE CLINIC (MTAC)

I, (IC No:)

agree to participate in the Medication Therapy Adherence Clinic (MTAC) programme organised by Pharmacy Department, Hospital Sultan Abdul Aziz Shah, Universiti Putra Malaysia. I agree to give full cooperation by attending counselling sessions organised by MTAC Pharmacists, as well as participating in activities beneficial in improving outcomes related to my medical condition. I consent to allow my medical data to be used by healthcare professionals for discussion purposes pertaining to the treatment and management of my medical condition.

Patient/guardian's signature:

Patient's Name:
Date:

Pharmacist's signature and stamp:

Pharmacist's Name:
Date: