

Pathology Slide Image Release Agreement

Parties

Name of Releasing Institution or Laboratory:

Representative Name:

Name of Recipient:

Affiliation (if applicable):

Details of Released Material

Type of Pathology Slide Images to be Released:

Case/Patient ID(s):

Date of Image Release:

Terms of Agreement

- All released pathology slide images are to be used solely for the purpose of:

- The recipient agrees not to distribute, share, or publish these images outside of the stated purpose without explicit written permission from the releasing institution.
- All images must be de-identified prior to release in compliance with applicable privacy laws and institutional policies.
- The recipient agrees to acknowledge the source of the images in all uses, publications, or presentations as:

- This release does not transfer ownership or copyright of the images.

Signatures

Releasing Institution Representative Signature

Date

Recipient Signature

Date
