

**CONSENT TO PARTICIPATE IN THE STUDY**

I declare that I have received all the information regarding the study, the purpose of which was to investigate physicians’ self-digital skills and analyze the opinions of obtaining online health information by their patients as well as the recognition of attitudes towards e-Health solutions.

I voluntarily consent to participate in this study, and I know that I can withdraw my consent to participate in the next part of the study at any time without giving any reason and without incurring costs.

Furthermore, I consent to the processing of the data in this study according to the law in force in Poland (Personal Data Protection Act of 10/05/2018).

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Date and signature