

Informed Consent

Assumptions

The student has general medical knowledge and understanding of medical ethical issues.

Objectives

By the end of the core surgical clerkship, the student will be able to:

1. Recite the definition of informed consent.
2. Identify the appropriate person to supply informed consent.
3. List the key components of informed consent:
 - a. The patient's diagnosis, if known
 - b. The nature, purpose, risks, and benefits of a proposed treatment or procedure
 - c. Potential treatment or procedure alternatives including risks and benefits (regardless of their cost or the extent to which the treatment options are covered by health insurance)
 - d. The risks and benefits of not receiving or undergoing a treatment or procedure
 - e. The names and signatures of the treating physician, patient, and witness as well as the date and time of signature
4. Describe differences in the consent process in some special circumstances:
 - a. The pre-medicated patient
 - b. The patient in labor
 - c. The patient under extreme stress
 - d. The patient with known mental illness
 - e. The patient with organic brain disease
 - f. The patient with developmental delay
 - g. Emergent procedures
 - h. Minors
 - i. Emancipated minors (define based on individual state law)
5. Demonstrate how the health care provider can influence the patient's decision during the informed consent process and understand the differences between coercion, manipulation, and persuasion.

Problems

1. A 45-year-old woman presents to the clinic with a diagnosis of breast cancer. The patient has come to terms with her diagnosis of cancer. After deliberation, she has decided on a mastectomy for her treatment.
 - a. What are the steps involved in obtaining an informed consent?
 - b. What are possible complications associated with the procedure?
 - c. What are possible alternatives for the patient? (Including non-operative alternatives).
 - d. Should the patient be told of other procedures that may be necessary down the road?
2. An 18-year-old man presents to the emergency room with an inguinal bulge that he noticed two months prior but will not go away now. He states that he has not had a bowel movement in two days and that he is in severe pain. He screams that all he wants now are large doses of pain medications.
 - a. What are the steps involved in obtaining an informed consent?
 - b. Should pain medication be held in order to obtain consent?
 - c. What are the possible complications related to this procedure?

Informed Consent (continued)

Problems (continued)

- d. Are there other alternatives that are possible?
 - e. The same patient arrives and immediately passes out and is unconscious. In the waiting room are his 18-year-old wife and his mother. The mother tells you that her son is thinking of separating from his wife, and the wife tells you that her husband has been estranged from his mother for many years. Who signs the consent?
3. A 55-year-old man presents to the emergency department unconscious. He was extracted from his vehicle after an MVC. The man has identification on his person when he brought to the ED but there was no one with him in the vehicle. He is wearing a wedding band. On assessment, he is noted to have a rigid abdomen but is hemodynamically stable. He is being taken to the operating room for a laparotomy.
 - a. Does informed consent apply to this situation?
 - b. What are the steps involved in obtaining an informed consent?
 - c. In what situations is a two-physician consent applicable?
 - d. Should there be an attempt to reach a family member?
 - e. What if someone is reached other than his spouse, should that person be consented?
 4. A 9-year-old boy presents with severe right lower quadrant abdominal pain. The boy appears to be pale, dehydrated and nauseous. On exam, he has rebound tenderness, a positive psoas and obturator sign, and pain at McBurney's point.
 - a. What are the steps involved in obtaining informed consent?
 - b. The parents are with him and you note that they are Native American. They are informed of the boy's condition and the need for an operation but they decline stating that they do not believe in modern medicine. What do you do next?
 - c. The boy then collapses and is difficult to arouse. Does he qualify for an emergent operation?
 - d. What are the possible options?

Skills

1. Complete the informed consent for a variety of procedures (i.e., hernia repairs, laparoscopic cholecystectomy, abscess incision and drainage, etc.).
2. Practice obtaining informed consent from a standardized patient.

Teaching Hints

1. Discuss the importance of proper documentation during the informed consent process.
2. Discuss the need for utilizing interpreters when the native language of the patient is not English.
3. Discuss ethical considerations and medico-legal issues.
4. Discuss the patient's right for refusal of hearing the risks of the procedure.
5. Discuss how medication affects a patient's ability to give a valid consent.
 - a. Should medication be withheld?
 - b. Does medication relieve stress and make a more clear decision?
 - c. What if medication has rendered the patient too sedated?
 - d. If medication is held, does the patient feel pressured to give consent to get pain medication?