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Informed consent for anaesthesia

Name:

.....

(First and both surnames of the patient)

National ID no.: .....

I hereby declare

That Doctor

.....

..... *(First and both surnames of the physician)*

has explained to me that the medical treatment recommended in my case .....

.....

Purpose:

The main purpose of general anaesthesia is to allow me to undergo an operation without experiencing pain by way of the administration of anaesthetic drugs intravenously and/or by inhalation, while ensuring the very highest levels of safety, comfort and monitoring during the surgical procedure.

If the operation can be carried out under locoregional anaesthesia, the aim of which is to produce a lack of sensitivity in the region to be operated on, which will remain numbed, this will be carried out; I will be awake during surgery.

General and regional anaesthesia may occasionally be combined provided this results in a benefit to me while surgery is being carried out or during the recovery period.

Description of the procedure:

- General anaesthesia involves inducing a reversible state of loss of consciousness, analgesia and muscle relaxation in me. To that end, a vein via which the sera and drugs required, depending on my situation and the type of surgery to be carried out, will be administered must be punctured. As I will be asleep and relaxed during general anaesthesia, a tube or other device may need to be inserted via my mouth or nose to allow me to keep breathing correctly. Depending on the complexity of the surgery or my state of health, I will need different degrees of monitoring, including heart and lung function. On occasions it will be necessary to cannulate an artery or the bladder or stomach in addition to the standard monitoring required for all surgical patients.

The anaesthesiologist is responsible for controlling the entire process and treating any complications that may arise.

- Locoregional anaesthesia involves the injection of drugs known as local anaesthetics, using a needle, close to a nerve, group of nerves or the spinal column, using different techniques, to produce lack of pain in the region where I am to undergo surgery. It is a full anaesthetic procedure that requires exactly the same precautions and monitoring by the anaesthesiologist as a general anaesthetic.

General risks:

To assess the surgical risk we must take into consideration the risk inherent to the surgical intervention itself, which will be explained to me by the surgeon, and the risk resulting from the anaesthesia. I am aware that millions of people undergo surgery and anaesthesia every year without any problems. However, the typical risks of general anaesthesia are:

- On rare occasions, insertion of the tube into the trachea (intubation) may prove difficult and, despite being performed carefully, this manoeuvre may damage a tooth (partially or completely, resulting in tooth loss) or part of the mouth, pharynx or larynx.
- During insertion of the tube some of the contents of the stomach may pass into the lung and cause breathing problems, which may occasionally be serious. One way of preventing this complication is to maintain absolute fasting (solids and liquids) according to the anaesthesiologist's instructions. After general anaesthesia, some discomfort such as hoarseness, nausea and vomiting, tremors or other complications, which are usually not serious and typically disappear within 48 hours, may appear.

The administration of locoregional anaesthesia has typical risks, such as:

- On very rare occasions, and as a result of difficulties inserting the access at a specific anaesthetic location, the anaesthesia administered may pass rapidly into the blood or nerve structures, thus resulting in effects similar to those of a general anaesthesia and which may be accompanied by serious complications, such as a decrease in blood pressure, alterations in the electrocardiogram, seizures and coma. These complications generally resolve but require the intervention to be carried out under general anaesthesia.
- Discomfort such as headache or back ache, which disappear over the following few days, may occur after the administration of locoregional anaesthesia.
- Some discomfort may remain in the region concerned after this type of anaesthesia, with a sensation of numbness or tingling, that is usually temporary, urinary retention, nausea and vomiting and incomplete analgesia.

Administration of the sera and drugs required during anaesthesia may rarely produce allergic reactions. On very rare occasions, these reactions can be serious. The systematic performance of allergy tests for anaesthetic drugs is not recommended as they are not appropriate in patients with no prior history of an adverse reaction to such drugs. The same occurs for other drugs. In addition, such tests are not risk-free, and even though the result thereof is negative, the anaesthetic drugs tested may still cause an adverse reaction during the anaesthetic procedure.

Irrespective of the risks and complications discussed above, serious situations that have a fatal outcome may very rarely occur during an anaesthetic procedure.

As a result of my clinical status, I may need to receive a transfusion of blood (or a blood derivative) from a healthy donor who has not received any financial compensation for the donation. Each such donation is analysed using the most accurate techniques to detect certain infectious disease (e.g. hepatitis, AIDS, etc.) that are transmitted in the blood. Despite this, blood and/or its components may still transmit these diseases, although the risk of this is very low. As is the case with drugs, blood and its components can trigger transfusion reactions.

Personalised risks:

All surgical procedures imply a series of common and potentially serious complications that may require complementary medical and/or surgical treatment and which, given my current health status (diabetes, heart disease, hypertension, anaemia, age, obesity), may increase risks or complications such as .....

.....

There is a classification known as the ASA Classification that evaluates the risk to patients based on their health status at the time of surgery.

ASA I
- Health status: Excellent, with no systemic disease
- Functional limitation: None.

ASA II
- Health status: Non-life threatening and controlled systemic disease.
- Functional limitation: None.

ASA III
- Health status: Major and controlled disease of one or more systems.
- Functional limitation: Present but not incapacitating.

ASA IV
- Health status: Poor but with at least one serious and poorly controlled or terminal disease.
- Functional limitation: Incapacitated.

ASA V
- Health status: Very poor or dying.
- Functional limitation: Incapacitated.

ASA VI
- Patient in brain death.

I have an ASA of ..... based on my current health status.

PATIENT'S DECLARATION

- I have been informed by the undersigned physician of:
  - The advantages and risks of the procedure indicated above.
  - The possible alternatives to it.
  - That I can revoke the consent given here at any time and without needing to give an explanation.
- I have understood the information provided to me and have had the opportunity to ask any questions that I may have had.

Consequently, I give my consent

..... **.....**

Signed: THE PATIENT **Signed: THE PHYSICIAN**

Med. Licence no.: .....

In ....., on ....

DECLARATION of family member, relative or legal representative, as applicable, who has received information due to the incompetence of the patient

Name ..... National ID no. ..... Signature .....

DECLARATION of witness, if applicable

Name ..... National ID no. ..... Signature .....

Denial or revocation

In the presence of the undersigned witnesses, I, Mr./Ms._____ having been informed of the nature and risks of the procedure indicated above, on _____ _____ 2_____ freely and consciously deny/revoke ***(delete as applicable)*** my consent to carry out said procedure and assume full responsibility for the medical and/or legal consequences that may arise as a result of this decision.

..... **.....**

Signed: THE PATIENT **Signed: THE PHYSICIAN**

Med. Licence no.: é é é é é é é ..