

Patient Agreement
To Investigation or Treatment

Summary of procedure: A camera is passed through the nose or mouth into the lungs. After inspection of the airways various samples may be taken. These include: washings or lavage, a sterile solution is injected into the lungs and then sucked back up; brushings, a brush is passed over an area of abnormality; mucosal biopsies, small pieces of tissues are taken from the airways; transbronchial lung biopsies, pieces of tissue from deep within the lung are taken; and transbronchial needle aspirates, a needle is passed into a gland or tumour on the other side of an airway.

1) Statement of patient/parent (You have a right to change your mind at any time, even after you have signed this form).

I have read and understand the information in the attached booklet, including the benefits and any risks.

I agree to the procedure described in this booklet and on the form. **I understand** that you cannot give me a guarantee that a particular person will perform the procedure. The person will, however have appropriate experience. When a trainee performs the examination it will be undertaken under the supervision of a fully qualified practitioner. **I understand** that I will have the opportunity to discuss the details of anaesthesia with an anaesthetist before the procedure, unless the urgency of my situation prevents this. (This only applies to patients having general or regional anaesthesia.)

If you would like to ask any further questions please do not sign the form now. Bring it with you and you can sign it after you have talked with a healthcare professional.

Signature Name (print) Date

2) Statement of health professional (to be filled in by health professional with appropriate knowledge of proposed procedure, as specified in consent policy). In response to a request for further information I have explained the procedure to the patient/parent. In particular I have explained:

The intended benefits:

- Diagnose your symptoms or lung abnormality.

Significant, unavoidable or frequently occurring risks:

- It is not uncommon to experience a sore throat, sense of fever or cough up small amounts of blood after the procedure. These will normally settle down over a few hours.
- Complications occur rarely (about 1 in 100 procedures). These include problems with breathing: wheeze, spasm of vocal cords, lung infection or fluid on the lung; problems with heart function and circulation: feeling faint due to low blood pressure or unusual heart rhythms; and severe bleeding.
- With transbronchial lung biopsies there is a greater risk of bleeding (1 in 50) and of pneumothorax or air leak (1 in 25) rarely would this require a tube to be inserted to drain the air from the chest.
- Complications resulting in death are very rare (less than 1 in 5000).

I have also discussed what the procedure is likely to involve, the benefits and risks of any available alternative treatments (including no treatment) and any particular concerns of those involved.

This procedure will involve: ☐ general and/or regional anaesthesia ☐ local anaesthesia ☐ sedation

Signed Date

Name (print) Job Title

3) Statement of interpreter (where appropriate) I have interpreted the information above to the patient/parent to the best of my ability and in a way which I believe s/he/they can understand.

Signed Date

Name (print)

4) Confirmation of consent (to be completed by a health professional when the patient is admitted for the procedure, if the patient/parent has signed the form in advance). I have confirmed that the patient/parent understands what the procedure involves, including the benefits and any risks. He/she has no further questions and wishes the procedure to go ahead.

Signed Date

Name (print) Job Title

5) Important Notes: (Tick if applicable)

☐ See also advance directive/living will (eg Jehovah's Witness form).

☐ Patient/Parent has withdrawn consent (ask patient/parent to sign/date here)

Guidance to Health Professionals (to be read in conjunction with ABHB 0004 policy on consent)

What a consent form is for

This form documents the patient's agreement to go ahead with the investigation or treatment you have proposed. It is not a legal waiver – if patients, for example, do not receive enough information on which to base their decision, then the consent may not be valid, even though the form has been signed. Patients are also entitled to change their mind after signing the form, if they retain capacity to do so. The form should act as an aide-memoire to health professionals and patients, by providing a check-list of the kind of information patients should be offered, and by enabling the patient to have a written record of the main points discussed. In no way, however, should the written information provided for the patient be regarded as a substitute for face-to-face discussions with the patient.

The law on consent

See the Department of Health's *Reference guide to consent for examination of treatment* for a comprehensive summary of the law on consent (also available at www.doh.gov.uk/consent or <http://www.wales.gov.uk/subihealth/toc-e.htm>).

Who can give consent

Everyone aged 16 or more is presumed to be competent to give consent for themselves, unless the opposite is demonstrated. If a child under the age of 16 has "sufficient understanding and intelligence to enable him or her to understand fully what is proposed", then he or she will be competent to give consent for himself or herself. Young people aged 16 and 17, and legally 'competent' younger children, may therefore sign this form for themselves, but may like a parent to countersign as well. If the child is not able to give consent for himself or herself, someone with parental responsibility may do so on their behalf and a separate form is available for this purpose. Even where a child is able to give consent for himself or herself, you should always involve those with parental responsibility in the child's care, unless the child specifically asks you not to do so. If a patient is mentally competent to give consent but is physically unable to sign a form, you should complete this form as usual, and ask an independent witness to confirm that the patient has given consent orally or non-verbally.

When NOT to use this form

If the patient is 18 or over and is not legally competent to give consent, you should use form 4 (form for adults who are unable to consent to investigation or treatment) instead of this form. A patient will not be legally competent to give consent if:

- They are unable to comprehend and retain information material to the decision and/or
- They are unable to believe, weigh and use this information in coming to a decision.

You should always take all reasonable steps (for example involving more specialist colleagues) to support a patient in making their own decision, before concluding that they are unable to do so. Relatives **cannot** be asked to sign this form on behalf of an adult who is not legally competent to consent for himself or herself.

Information

Information about what the treatment will involve, its benefits and risks (including side-effects and complications) and the alternatives to the particular procedure proposed, is crucial for patients when making up their minds. The courts have stated that patient should be told about 'significant risks which would affect the judgement of a reasonable patient'. 'Significant' has not been legally defined, but the GMC requires doctors to tell patients about 'serious or frequently occurring' risks. In addition if patients make clear they have particular concerns about certain kinds of risk, you should make sure they are informed about these risks, even if they are very small or rare. You should always answer questions honestly. Sometimes, patients may make it clear that they do not want to have any information about the options, but want you to decide on their behalf. In such circumstances, you should do your best to ensure that the patient receives at least very basic information about what is proposed. Where information is refused, you should document this on the form or in the patient's notes.