

Patient information

About the Consent Form an Information Leaflet for Patients and Their Families

Trust Wide Information – Royal Liverpool Hospital Sites

About the consent form

Before a doctor or other health professional examines or treats you, they need your consent. Sometimes you can simply tell them whether you agree with their suggestions. However, sometimes a written record of your decision is necessary – for example if your treatment involves sedation or general anaesthesia, and/or if we need to inform you of the risks and benefits to treatment options. You will then be asked to sign a consent form. If you later change your mind, you are entitled to withdraw consent at any time – even after signing.

What should I know before deciding?

Health professionals must ensure you know enough to enable you to decide about treatment. They will write information on the consent form and offer you a copy to keep as well as discussing the choices of treatment with you.

Although they may well recommend a particular option, you are free to choose another. People's attitudes vary on things like the amount of risk or pain they are prepared to accept. That goes for the amount of information, too. If you'd rather not know about certain aspects, discuss your worries with whoever is treating you.

What if I have a mental illness?

If you are suffering from a mental illness, it may be necessary for you to stay in hospital under the Mental Health Act 1983 (revised 2007). If so, you may be given treatment for your mental health problem, even if you do not consent. There are safeguards for patients in this situation.

However, the terms of the Act only apply to treatment for a mental health problem. You may also have a physical health problem (concerned with your body) that has nothing to do with your mental health condition.

If treatment is suggested for a physical health problem, you are entitled to choose whether or not to accept it, as long as you are able to understand enough about the choices offered to make a decision.

Is there anything I should tell people?

If there's any procedure you **don't** want to happen, (including being given blood or blood products), you should tell the people treating you. It's also important for them to know about any illnesses or allergies, which you may have or have suffered from in the past.

Also, if you have made an Advance Decision or a Lasting Power of Attorney (LPA) for Health you should inform and provide a copy to the people treating you which will then be filed in your medical record.

A Lasting Power of Attorney (LPA) for Health cannot be used until it's registered with the Office of the Public Guardian. A LPA is a legal document. It allows you to appoint someone you trust as an 'attorney' to make decisions about welfare and/or medical treatment on your behalf. Attorneys can make decisions for you when you no longer wish to or when you lack the mental capacity to do so.

Who is treating me?

Amongst the health professionals treating you may be a "doctor in training" – medically qualified, but now doing more specialist training. They range from recently qualified doctors to doctors almost ready to be consultants. Specialist Nurses, Therapists or other health professionals may also be treating you. They will all only carry out procedures for which they have been appropriately trained.

Someone senior will supervise – either in person accompanying a less experienced doctor or health professional in training, or available to advise someone more experienced.

You can ask for someone of the same sex as yourself to be with you while you are being examined or treated.

What about anaesthesia?

If your treatment involves general or regional anaesthesia, (where more than a small part of your body is being anaesthetised), you will be given general information about it in advance.

You will also have an opportunity to talk with the anaesthetist when he or she assesses your state of health shortly before treatment.

Hospitals sometimes have pre-assessment clinics, which provide patients with the chance to discuss things a few weeks earlier.

Will samples be taken?

Some kinds of operation involve removing a part of the body (such as a gall bladder or a tooth). You would always be told about this in advance. Other operations may mean taking samples as part of your care. These samples may be of blood, other body fluids such as urine, or small sections of tissue, for example of an unexplained lump. Such samples may be further checked by other health professionals to ensure the best possible standards. Again, you should be told in advance if samples are likely to be taken.

Under current guidance (Human Tissue Act 2004), the patient's consent is not required for surplus tissue to be used for research as long as the samples are anonymised and the researcher cannot link the blood or tissue to the patient.

However, research is of more value if it can be linked to the relevant part of the patient's medical record to allow research data to be matched with clinical condition or outcome. This does require patient consent. All research is subject to approval and monitoring by an appropriate NHS Research Ethics Committee.

Consent is not needed to use surplus blood, tissue and other body fluids from the living patients' investigations or surgery, for the purpose of:

- Public health monitoring.
- Education and training (including training in research techniques).
- Clinical audit.
- Performance assessment (e.g. testing medical devices).
- Quality assurance.

Photographs and videos

As part of your treatment, some kind of photographic record may be made – for example X-rays, clinical photographs or sometimes a video. You will always be told if this is going to happen. The photograph or recording will be kept with your notes and will be held in confidence as part of your medical record. This means that it will normally be seen only by those involved in providing you with care or those who need to check the quality of care you have received.

The use of photographs and recordings is also extremely important for other NHS work, such as teaching or medical research. However, we will not use yours in a way that might allow you to be identified or recognised without your express permission.

What if things don't go as expected?

Amongst all the operations taking place every day, sometimes things don't go as they should. Although the doctor involved should inform you and your family, often the patient is the first to notice something amiss.

If you're worried – for example about the after-effects of an operation continuing much longer than you were told to expect – tell a health professional right away. Speak to your GP, or contact your clinic – the phone number should be on your appointment card, letter or consent form copy.

What are the key things to remember?

It's your decision! It's up to you to choose whether or not to consent to what's being proposed. Ask as many questions as you like, and remember to tell the team about anything that concerns you or about any medication, allergies or past history, which might affect your general health.

Questions to ask health professionals

As well as giving you information, health professionals must listen and do their best to answer your questions.

Questions may be about the treatment itself, for example:

- What are the main treatment options?
- What are the benefits of each of the options?
- What are the alternatives?
- What are the risks, if any, of each option?
- What are the success rates for different options – nationally, for this unit or for you (the surgeon)?
- Why do you think an operation (if suggested) is necessary?
- What are the risks if I decide to do nothing for the time being?
- How can I expect to feel after the procedure?
- When am I likely to be able to get back to work?

Questions may also be about how the treatment might affect your future state of health or style of life, for example:

- Will I need long-term care?
- Will my mobility be affected?
- Will I still be able to drive?
- Will it affect the kind of work I do?
- Will it affect my personal/sexual relationships?
- Will I be able to take part in my favourite sport/exercises?
- Will I be able to follow my usual diet?

Health care professionals should welcome your views and discuss any issues so they can work in partnership with you for the best outcome.

Patient Notes

Author: Governance Department
Review date: July 2022

All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

يمكن توفير جميع المعلومات المتعلقة بالمرضى الموافق عليهم من قبل انتمان المستشفى عند الطلب بصيغ أخرى، بما في ذلك لغات أخرى وبطرق تسهل قراءتها وبالحروف الطباعة الكبيرة وبالصوت وبطريقة برايل للمكفوفين وبطريقة مون والإلكترونياً.

所有經信托基金批准的患者資訊均可以其它格式提供，包括其它語言、易讀閱讀軟件、大字體、音頻、盲文、穆恩體 (Moon) 盲文和電子格式，敬請索取。

در صورت تمایل می‌توانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

زانیاری پیوندیدار به نموشانه‌ی له‌لایمن تراستهوه پساند کراون، نگمر داوا بکرنیت له فوزماتمکانی تردا بریتی له زمانمکانی تر، نیزی رید (هاسان خونندنهوه)، چاپی گسوره، شریتی دنگ، هیلای موون و نلمیکترونیکی همیه.

所有经信托基金批准的患者信息均可以其它格式提供，包括其它语言、易读阅读软件、大字体、音频、盲文、穆恩体 (Moon) 盲文和电子格式，敬请索取。

Dhammaan warbixinta bukaanleyda ee Ururka ee la oggol yahay waxaa marka la codsado lagu heli karaa nuskhado kale, sida luqado kale, akhris fudud, far waaweyn, dhegeysi, farta braille ee dadka indhaha la', Moon iyo nidaam eletaroonig ah.