

CONFIRMATION OF INFORMED CONSENT PROTOCOL

DATE:

This note documenting the informed consent process should carry a date and time. It should also be clear, concise and comprehensive, yet detailed enough to convey that a two-way conversation took place. To assist with the process and the development of the note, the following checklist should help.

Dr(s).....(physician name/s), talked with

.....(patient) and

.....(name), the patient's (circle one: spouse, parent, guardian, curator, mandated person, grandparent, adult child, brother, sister) and gave the following information: **[Check appropriate categories and fill in the blanks]:**

- Diagnosis /prognosis

- The nature, purpose and description (in lay terms) of the proposed operation, treatment, procedure, process

- The risks, benefits, costs of a proposed operation/treatment/procedure/process, including the likelihood of success **[must be straightforward and honest, not only conveying known risks but also anticipated complications eg pain, discomfort, disability, disfigurement]**

- Alternatives, regardless of their cost or the extent to which the treatment options are covered by health insurance **[if none exist, note that fact]**

- The risks and benefits of not receiving or undergoing the operation/treatment/procedure/process and the right to refuse and intervention

- I gave the patient the opportunity to ask questions and suggested talking with me later if any questions arise. **[Questions were answered in a manner that the patient could understand]**

- The patient was lucid and coherent at all times

SIGNATURE OF PATIENT

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SIGNATURE OF DOCTOR