

INFORMED CONSENT FOR CHOLECYSTECTOMY SURGICAL PROCEDURE



Document Number	Date of Publish	Revision Date	Revision Number
HD.RB.IN.07.14	22.03.2022	-	00
Reason for revision:			

Patient Information		
Name and Surname	Protocol Number	Department
Birth Date	Physician Signature	

Dear Patient, Dear Patient's Parent

Please read the form carefully and answer the questions!

Your physician will inform you about the course of this treatment, its various forms and risks before the treatment, and at the end of this, you will be able to decide whether or not to perform the treatment with your free will. This form has been prepared to help you prepare for your interview with your doctor.

Diagnosis:

You have been diagnosed as having gallbladder disease. This may be caused by gallstones (cholelithiasis) or inflammation of the gallbladder (cholecystitis). The gallbladder may not work normally when it is inflamed or if there are stones in it. The inflammation may be chronic (lasting a long time) or acute (severe and lasting a short period of time). Gallbladder inflammation may happen because of foods that are eaten, an infection or if stones block the cystic duct (opening out of the gallbladder). Symptoms include pain in the upper abdominal area, nausea, vomiting, bloating, belching, indigestion, heartburn and intolerance of fried, fatty or spicy foods.

Name of Procedure/Treatment:

The treatment of choice of symptomatic gallbladder disease is cholecystectomy (removal of the gallbladder). The vast majority of cholectystectomies are performed utilizing a laparoscope (a thin telescope-like tube) that is inserted through a puncture wound near the navel. Other instruments are placed through two or three other puncture wounds in the upper abdomen. By utilizing these instruments and the TV camera, the gallbladder is removed from the abdomen. If at the time of the surgery, it is not safe to complete the procedure laparocopically, an incision is made under the rib cage on the right side of the abdomen, and the gallbladder is removed in the traditional (open) manner. In some circumstances, a cholangiogram (x-ray of the bile duct) may be obtained at the time of surgery to see if stones have passed out of the gallbladder into the main bile duct. If stones are in the common (main) bile duct, a COMMO BILE DUCT EXPLORATION through an OPEN incision is usually performed to remove the stones. A drainage tube is placed in the common duct following the exploration, which will be removed later in the office. If the gallbladder is severely inflamed, drains are sometimes placed down the gallbladder bed and removed before going home.

Risks common to all surgical procedures:

- Injury to a blood vessel or excessive bleeding. This may require a blood transfusion.
- Infection, which may require the use of antibiotics. In rare cases, another surgical procedure may be necessary to remove the infection.
- Complications with anesthesia. This may include nausea, vomiting, or in rare cases, death.
- Tobacco use, excessive alcohol use and obesity can increase the risk of any surgical procedure or general anesthetic. Any of these factors may substantially affect healing and can result in an increase of major complications including pneumonia, wound infection, blood clots in the legs and lungs, or death.

Risks and possible complications of the proposed treatment:

- Injury to the common bile duct which necessitates an open repair
- Injury to the surrounding organs that require repair
- Rare injury to the intestinal tract which may require repair or partial removal
- Collection of fluid (bile or blood that might require drainage)
- Bleeding in the abdominal wall where the tubes for the instrument are placed
- Discovery of a stone in the common bile duct following surgery, which may require removal if they do not pass spontaneously
- Long term complications can include structuring of the bile duct which necessitates further surgery
- Side effects that occasionally occur include diarrhea and occasionally reflux gastritis, both usually treated with medications. These risks and side effects can occur in both LAPAROSCOPIC and OPEN surgery.



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Alternative Treatments:

Observation is the most common alternative to treatment. Occasionally, patients with gallbladder disease can remain symptom free for long periods of time. The greatest risk of observation is progression of the disease and increased symptoms. Mechanical or chemical dissolution of gallstone has been proposed but is generally not effective, because the disease gallbladder remains in place.

Physician's Notes		
Physician's Stamp-Signature-Date-Time		

Consent Statement of the Patient or patient's parents

- I informed by the doctor with necessary explanations. I understood the issues I need to pay attention to before and after the treatment.
- I got detailed information about what the planned treatment is, its necessity and other treatment options, their risks, the consequences that may arise in the absence of treatment, the probability of success and side effects of the treatment.
- It was explained that during the treatment, all documents and samples related to me can be used for educational purposes.
- My doctor answered all the questions in a way that I can understand, I got information about the people who will make the treatment.
- I know the meaning of the informed consent form.

Name and Surname

• I know that I do not have to consent to the treatment if I do not want to, or I know that I can stop the procedure at any stage.

The patient or patient's parent / relative (degree)				
Name and Surname	Sign	Place	Date	Hour
 Both parents of the patier is taking care of the child 			signature, the signer r	must prove that pati
• Unless I have a written re sion, waist fluid removal,		eries of medical or su		

Prepared By	Controlled By	Approved By
General Surgeon	Quality Director	General Director

Date

Adress

Sign