

# THYROID (GOITER)-THYROGLOSSAL CYST EXCISION SURGERY CONSENT FORM



Document Number	Date of Publish	Revision Date	Revision Number
HD.RB.IN.07.16	24.02.2022	-	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.

### Possible Causes of the Disease and How It Progresses

Causes: Iodine deficiency, immune system disorders (such as Graves' disease, Hashimoto's disease), hormonal changes during pregnancy and adolescence, infections, excessive iodine intake, exposure to radiation (radiotherapy).

# **Progression:**

When the thyroid gland enlarges, the level of hormone production can remain the same or undergo changes such as decrease or increase. This condition can manifest with various physiological symptoms, including difficulty breathing, sleep disturbances, weight gain or weight loss, palpitations, and cough.

Excessively enlarged thyroid gland can cause difficulties in swallowing and breathing, and it may affect the aesthetic appearance.

Nodules that develop within the enlarged gland can potentially become cancerous. Excessive functioning of the gland can have harmful effects on the body.

# **Expected Benefits from the Process**

Removing the thyroid gland can alleviate the compression on other organs. For example, in cases where the thyroid gland enlargement causes pressure on the trachea, removing the thyroid gland can improve the patient's ability to breathe more comfortably. Thyroidectomy also provides aesthetic benefits by restoring a more pleasing appearance, especially when the enlarged thyroid gland causes visible swelling in the neck area.

Additionally, removing nodules through thyroidectomy eliminates the possibility of those nodules transforming into cancer. In cases of inadequately controlled hyperthyroidism, where medical treatment alone is not sufficient, thyroidectomy can help reduce the adverse effects of excessive thyroid hormone production on the body.

# **Possible Risks/complications**

### During and after total/subtotal thyroidectomy surgery, there are general risks that can occur:

- There is a risk of developing blood clots in the deep veins of the legs (Deep Vein Thrombosis, DVT). These blood clots can cause symptoms such as pain, swelling, and cramping in the legs. Additionally, if fragments of these clots break off and travel to the lung arteries, it can result in a blockage (Pulmonary Embolism) that may cause difficulty in breathing and, in severe cases, even death.
- After the surgery, there is a possibility of developing collapses in the small airways of the lungs (Atelectasis), which can lead to lung inflammation (Pneumonia) and prolong the hospital stay, requiring additional treatments.
- There is a potential risk of experiencing a heart attack due to the strain on the cardiovascular system during the surgery.

### During and after total/subtotal thyroidectomy surgery, there are specific risks that can occur:

- There is a risk of developing an infection in the surgical wound, which can cause pain, redness, or discharge. In such cases, antibiotic treatment may be necessary.
- Depending on the injury to the nerves that control the movement of the vocal cords, there is a possibility of experiencing permanent or temporary vocal cord paralysis or changes in voice quality (such as difficulty producing certain sounds, voice hoarseness, or quick fatigue during speech). In rare cases, if both nerves are affected, it may result in difficulty breathing, requiring the creation of an external airway (Tracheostomy) for breathing assistance.
- Damage to the parathyroid glands or their blood supply can lead to numbness in the fingers and face, as well as muscle spasms in the arms and legs. It is important to inform the doctor if such symptoms occur. In most cases, these issues resolve spontaneously. However, in rare instances, long-term treatment with medications such as calcium and vitamin D may be required.
- There is a possibility of postoperative bleeding or leakage from the surgical site, which can lead to respiratory difficulties. In such cases, it may be necessary to undergo a second surgery to address the issue.
- If the thyroid gland is partially or completely removed, lifelong hormone replacement therapy with thyroid hormone pills is necessary. If a portion of the thyroid gland is left, it may require several years of hormone therapy. Regular blood tests may be required to adjust the duration of treatment and the dosage of medication.
- If both thyroid glands are not completely removed during the surgery, there is a possibility of future growth in the remaining thyroid tissue, which may require further treatment or surgery.
- If the surgery is performed for cancer, additional treatments may be required. Additionally, the surgery may not completely cure the cancer, and there is a possibility of cancer recurrence in the remaining tissue. New lymph node spread that was not detected during the surgery may also emerge. Additional surgical procedures or treatments may be necessary due to these conditions.
- Prolonged or sometimes permanent sensory impairment, tingling, deformities, or excessive scar formation (keloid or hypertrophic scar development) around the surgical area may occur.
- The surgery and the postoperative period may result in limitations in daily activities, habits, preferences, and lifestyle.



# THYROID (GOITER)-THYROGLOSSAL CYST EXCISION SURGERY CONSENT FORM



Document Number	Date of Publish	Revision Date	Revision Number
HD.RB.IN.07.16	24.02.2022	-	00
Reason for Revision:			

### Possible risks that may arise in case of rejection include:

It should be considered that if you refuse the surgery, the disease may progress, and even non-surgical methods may prove ineffective. The main reason for surgically removing the swelling (nodules) in your thyroid gland, also known as goiter, is the suspicion of cancer. In such cases, the decision for surgery is made to diagnose and treat the condition. Additionally, some nodules in the thyroid can continue to grow rapidly and cause symptoms due to their mass effect, even if they are not cancerous. In such cases, it is common to discuss with your doctor and make a decision for surgery.

#### Critical lifestyle recommendations for the patient's health are as follows:

Patients who have undergone thyroidectomy often try to minimize movement of their necks and continue doing so for several days. However, this behavior can lead to neck pain later on and cause the wound to adhere tightly to the underlying muscles, resulting in an unfavorable cosmetic appearance. The correct approach is to maintain some degree of neck movement during the postoperative period without exerting excessive force. This has no drawbacks and can be beneficial.

#### **Current alternative methods include:**

Medication can be administered. Radioactive iodine therapy can be applied.

# What are the important characteristics of the medications that will be used during/after your surgery?

Depending on the type of thyroidectomy performed, certain medications may be necessary after the surgery. In patients where a significant portion of the thyroid gland is removed, it is important to take a daily medication containing thyroid hormone to prevent recurrence in the following years. The dosage of this medication is determined through blood tests conducted every 2 months. Based on the results, the prescribed dosage may be adjusted, either decreased or increased.

After thyroid surgery, some patients may experience symptoms such as numbness, tingling, or loss of sensation in their fingertips. In such cases, blood calcium levels are checked, and if necessary, calcium and vitamin D supplements are provided. Blood tests are conducted periodically to assess the need for continuing or discontinuing these medications.

Prior to the procedure, antibiotics may be administered, and painkillers may be prescribed for postoperative pain management for a certain period of time. It is also important to inform your doctor if you have been taking blood-thinning medications such as aspirin before the surgery.

### How to access Medical Assistance for the same issue if necessary?

In case of an emergency, the patient should seek immediate medical attention at our hospital or the nearest healthcare facility. During the discharge process, it is important to follow the postoperative recommendations provided. If any unexpected conditions arise, such as signs of infection, bleeding, or suspicion of bleeding, it is crucial to consult your doctor.

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.
- 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.

T KHOW that I do not have to consent	to the treatment if I do n	ot want to, or ranow the	it I can stop the proced	are at any stage.
Please with your handwriting, write 'I have read, understood and accept this 3-pages form.' and sign.				
	The nations or nations	t'a nament / valative (d.	agrae)	
	The patient or patient	t's parent / relative (de	egreej	
Name and Surname	Sign	Place	Date	Hour
	9			
				1
NOTE: If the patient is unable to give o	consent, the identity in	formation and signatu	re of the person whos	e consent is obtained is

NOTE: If the patient is unable to give consent, the identity information and signature of the person whose consent is obtained is taken.



# THYROID (GOITER)-THYROGLOSSAL CYST EXCISION SURGERY CONSENT FORM



Document Number	Date of Publish	Revision Date	Revision Number
HD.RB.IN.07.16	24.02.2022	-	00
Reason for Revision:			

- Both parents of the patient must sign. If only one of the parents has the signature, the signer must prove that patient is taking care of the child himself or has the other guardian's consent.
- Unless I have a written request for removal, for the same repeated procedures, for example dialysis, blood transfusion, waist fluid removal, in other cases where a series of medical or surgical treatment will be applied in the same way during the hospitalization, etc. this consent will be valid.

The person providing communication in cases where direct communication with the patient cannot be established,					
I explained the information in the 'Informed Consent Form' to the patient, patient's parents or relatives as best I could.					
Name and Surname	Address	Date	Sign		

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