**General risks**

They include but are not limited to the following.

- Infection can occur, requiring antibiotics and further treatment.
- Bleeding could occur and may require a return to the operating room. Bleeding is more common if you have been taking blood thinning drugs such as Warfarin, Aspirin, Clopidogrel (Plavix or Iscover) or Dipyridamole (Persantin or Asasantin).
- Small areas of the lung can collapse, increasing the risk of chest infection. This may need antibiotics and physiotherapy.
- Increased risk in obese people of wound infection, chest infection, heart and lung complications, and thrombosis.
- Heart attack or stroke could occur due to the strain on the heart.
- Blood clot in the leg (DVT) causing pain and swelling. In rare cases part of the clot may break off and go to the lungs.
- Death as a result of this procedure is possible.

**Specific risks:**

- Bleeding. This may either at the time of surgery or in the first 2 weeks after surgery. Delayed bleeding may require re-admission to hospital and may require another operation to stop the bleeding. A blood transfusion may be necessary depending on the amount of blood lost.
- Burns from the equipment used to seal off bleeding areas during the operation.
- Infection. Persistent bad breath, worsening throat discomfort or delayed bleeding may indicate an infection. This is usually treated with antibiotics. Delayed bleeding is treated as outlined above.
- Pain. Moderate throat pain is common during the first 2 weeks after surgery, requiring regular analgesia. Rarely, pain in the area back of the tongue or back of the throat.
- Injury to the teeth, lips, gums or tongue. There can also be a temporary change in sensation to tongue.
- Abnormal scarring may rarely occur causing narrowing or stenosis of the throat or strange sensations in the throat.

**Condition and treatment**

The doctor has explained that you have the following condition: *(Doctor to document in patient’s own words)*

This condition requires the following procedure.

*(Doctor to document - include site and/or side where relevant to the procedure)*

The following will be performed:

- A tonsillectomy is the surgical removal of the tonsils from the back of the mouth.

**Risks of a Tonsillectomy**

There are risks and complications with this procedure. They include but are not limited to the following.

**General risks:**

- Infection. Persistent bad breath, worsening throat discomfort or delayed bleeding may indicate an infection. This is usually treated with antibiotics. Delayed bleeding is treated as outlined above.
- Pain. Moderate throat pain is common during the first 2 weeks after surgery, requiring regular analgesia. Rarely, pain in the area back of the tongue or back of the throat.
- Injury to the teeth, lips, gums or tongue. There can also be a temporary change in sensation to tongue.
- Abnormal scarring may rarely occur causing narrowing or stenosis of the throat or strange sensations in the throat.

**Risks of not having this procedure**

*(Doctor to document in space provided. Continue in Medical Record if necessary.)*

**F. Anaesthetic**

This procedure may require an anaesthetic. *(Doctor to document type of anaesthetic discussed)*
I acknowledge that the doctor has explained;

- my medical condition and the proposed procedure, including additional treatment if the doctor finds something unexpected. I understand the risks, including the risks that are specific to me.
- the anaesthetic required for this procedure. I understand the risks, including the risks that are specific to me.
- other relevant procedure/treatment options and their associated risks.
- my prognosis and the risks of not having the procedure.
- that no guarantee has been made that the procedure will improve my condition even though it has been carried out with due professional care.
- the procedure may include a blood transfusion.
- tissues and blood may be removed and could be used for diagnosis or management of my condition, stored and disposed of sensitively by the hospital.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor or my Acute Resuscitation Plan.
- a doctor other than the Consultant may conduct the procedure. I understand this could be a doctor undergoing further training.

I have been given the following Patient Information Sheet/s:
- About Your Anaesthetic
- Tonsillectomy
- Blood & Blood Products Transfusion

I was able to ask questions and raise concerns with the doctor about my condition, the proposed procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.

I understand I have the right to change my mind at any time, including after I have signed this form but, preferably following a discussion with my doctor.

I understand that image/s or video footage may be recorded as part of and during my procedure and that these image/s or video/s will assist the doctor to provide appropriate treatment.

On the basis of the above statements,
1. **What is a Tonsillectomy?**

A tonsillectomy is the surgical removal of the tonsils from the back of the mouth.

2. **My anaesthetic**

This procedure will require an anaesthetic. See About Your Anaesthetic information sheet for information about the anaesthetic and the risks involved. If you have any concerns, discuss these with your doctor.

*If you have not been given an information sheet, please ask for one.*

3. **What are the risks of this specific procedure?**

There are risks and complications with this procedure. They include but are not limited to the following.

**General risks:**

- Infection can occur, requiring antibiotics and further treatment.
- Bleeding could occur and may require a return to the operating room. Bleeding is more common if you have been taking blood thinning drugs such as Warfarin, Asprin, Clopidogrel (Plavix or Iscover) or Dipyridamole (Persantin or Asasantin).
- Small areas of the lung can collapse, increasing the risk of chest infection. This may need antibiotics and physiotherapy.
- Increased risk in obese people of wound infection, chest infection, heart and lung complications, and thrombosis.
- Heart attack or stroke could occur due to the strain on the heart.
- Blood clot in the leg (DVT) causing pain and swelling. In rare cases part of the clot may break off and go to the lungs.
- Death as a result of this procedure is possible.

**Specific risks:**

- Bleeding. This may either at the time of surgery or in the first 2 weeks after surgery. Delayed bleeding may require re-admission to hospital and may require another operation to stop the bleeding. A blood transfusion may be necessary depending on the amount of blood lost.
- Burns from the equipment used to seal off bleeding areas during the operation.
- Infection. Persistent bad breath, worsening throat discomfort or delayed bleeding may indicate an infection. This is usually treated with antibiotics. Delayed bleeding is treated as outlined above.
- Pain. Moderate throat pain is common during the first 2 weeks after surgery, requiring regular analgesia. Rarely, pain in the area back of the tongue or back of the throat.