Colposuspension/ Retropubic Bladder Neck Suspension

Facility:

A. Interpreter / cultural needs

An Interpreter Service is required? [ ] Yes [ ] No
If Yes, is a qualified Interpreter present? [ ] Yes [ ] No
A Cultural Support Person is required? [ ] Yes [ ] No
If Yes, is a Cultural Support Person present? [ ] Yes [ ] No

B. Condition and treatment

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

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This condition requires the following procedure. (Doctor to document - include site and/or side where relevant to the procedure)

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The following will be performed:

An operation through a cut in the lower abdomen or groin (“key hole” surgery). The operation attempts to ‘hitch up’ the neck of the bladder to reduce urinary incontinence (leaking of urine).

C. Risks of a colposuspension/ retropubic bladder neck suspension

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

General risks:

- Bleeding could occur and may require a return to the operating room. Bleeding is more common if you have already taken 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:

- Failure of the procedure to cure the urinary problems, and occasionally exaggerates them temporarily or permanently.
- Haemorrhage from arteries and veins about the bladder, vagina and pelvis that may require blood transfusion and further surgery.
- Infection in the operation site or pelvis or urinary tract which will require treatment with antibiotics.
- Difficulty with urine flow after the operation which may be temporary or permanent. Difficulties include:
  - initiating urine flow.
  - altered urinary flow, including delay in emptying of bladder; or
  - urgency symptoms may occur or get worse if already present. This may be permanent.
- Injury to adjacent organs eg. bladder, ureter or the urethra which may require further surgery. This includes the risk of kinkage or obstruction of ureter, the risk of bladder perforation; the risk of suture passing into the bladder, that may need removal at a later stage, and result in recurrent urinary tract infections.
- Infection of the bone about the pubis which can cause ongoing pain and may need treatment with long term antibiotics.
- Increased risk in smokers of wound and chest infections, heart and lung complications and thrombosis.

D. Significant risks and procedure options

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

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E. Risks of not having this procedure

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

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F. Anaesthetic

This procedure may require an anaesthetic. (Doctor to document type of anaesthetic discussed)

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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:

- Epidural and Spinal Anaesthetic
- About Your Anaesthetic
- Colposuspension/ Retropubic Bladder Neck Suspension

- 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,
Consent Information - Patient Copy
Colposuspension/ Retropubic Bladder Neck Suspension

1. What do I need to know about this procedure?
This operation is for female urinary incontinence.
This procedure will be performed by laparotomy, (any major surgical procedure that involves opening the abdomen) or laparoscopy (A slender, tubular endoscope that is inserted through an incision in the abdominal wall to examine or perform minor surgery within the abdomen).
An operation through a cut in the lower abdomen or groin ("key hole" surgery). The procedure attempts to ‘hitch up’ the neck of the bladder to reduce urinary incontinence (leaking of urine).

2. My anaesthetic
This procedure will require an anaesthetic.
See Epidural and Spinal Anaesthetic and/or About Your Anaesthetic 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:**
- 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.
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**Specific risks:**
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- Infection of the bone about the pubis which can cause ongoing pain and may need treatment with long term antibiotics.
- Increased risk in smokers of wound and chest infections, heart and lung complications and thrombosis.

Notes to talk to my doctor about: