



Queensland
Government

Medical Imaging Generic Consent

Adult (18 years and over)

Procedure:

Facility:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

A. Does the patient have capacity to provide consent?

- Yes → **GO TO section B**
 No → **COMPLETE section A**

You must adhere to the Advance Health Directive (AHD), or if there is no AHD, the consent obtained from a substitute decision-maker in the following order: Category 1. Tribunal-appointed guardian; 2. Enduring Power of Attorney; or 3. Statutory Health Attorney.

Name of substitute decision-maker:

Category of substitute decision-maker:

B. Is an interpreter required?

- Yes No

If yes, the interpreter has:

- provided a sight translation of the informed consent form in person
 translated the informed consent form over the telephone

It is acknowledged that a verbal translation is usually a summary of the text on the form, rather than word-by-word translation.

Name of interpreter:

Interpreter code:

Language:

C. Patient/substitute decision-maker confirms the following procedure(s)

Note: if nuclear medicine is to be used, use SW9598 Nuclear Medicine Scan Generic Consent instead of this form.

Site/side of procedure:

This procedure will require: (select one or more)

- Local anaesthetic General anaesthetic
 Sedation anaesthetic No anaesthetic

Name of referring doctor/clinician:

Pregnancy/breastfeeding questions for the patient

Are you or could you be pregnant?

- Yes No Unsure

Are you breastfeeding?

- Yes No

The doctor/clinician will review these answers and, if required, obtain further advice from a doctor or another clinician regarding your pregnancy status prior to the scan.

D. Risks specific to the patient in having the procedure

(Doctor/clinician to document additional risks not included in the patient information sheet):

E. Risks specific to the patient in not having the procedure

(Doctor/clinician to document specific risks in not having the procedure):

DO NOT WRITE IN THIS BINDING MARGIN

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SW9594

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F. Alternative procedure options

(Doctor/clinician to document alternative procedure not included in the patient information sheet):

I was able to ask questions and raise concerns with the doctor/clinician.

I understand I have the right to change my mind regarding consent at any time, including after signing this form (*this should be in consultation with the doctor/clinician*).

I/substitute decision-maker have received the following consent and patient information sheet(s):

- 'Medical Imaging'
- 'Medical Imaging and Radiation'
- 'About Your Anaesthetic'
- 'Blood and/or Manufactured Blood Products Transfusion (Full/Limited Consent)'
- 'Blood and/or Manufactured Blood Products Transfusion (REFUSAL to Consent)'
- Other (*specify*):

G. Information for the doctor/clinician

The information in this consent form is not intended to be a substitute for direct communication between the doctor/clinician and the patient/substitute decision-maker.

I have explained to the patient/substitute decision-maker the contents of this form and am of the opinion that the information has been understood.

Name of doctor/clinician:

Designation:

Signature:

Date:

H. Patient/substitute decision-maker consent

I acknowledge that the doctor/clinician has explained:

- the procedure's patient information sheet
- the medical condition and proposed treatment, including the possibility of additional treatment
- the specific risks and benefits of the procedure
- the prognosis, and risks of not having the procedure
- alternative procedure options
- that there is no guarantee the procedure will improve the medical condition
- that the procedure may involve a blood transfusion
- that tissues/blood may be removed and used for diagnosis/management of the condition
- that if a life-threatening event occurs during the procedure, I will be treated based on documented discussions (e.g. AHD or ARP [Acute Resuscitation Plan])
- that a doctor/clinician other than the consultant/specialist may assist with/conduct the clinically appropriate procedure; this may include a doctor/clinician undergoing further training under supervision
- that if the doctor/clinician wishes to record video, audio or images during the procedure where the recording is not required as part of the treatment (e.g. for training or research purposes), I will be asked to sign a separate consent form. If I choose not to consent, it will not adversely affect my access, outcome or rights to medical treatment in any way.

On the basis of the above statements,

1) I/substitute decision-maker consent to having the procedure.

Name of patient/substitute decision-maker:

Signature:

Date:

2) Student examination/procedure for professional training purposes:

For the purpose of undertaking training, a clinical student(s) may observe medical examination(s) or procedure(s) and may also, subject to patient/substitute decision-maker consent, assist with/conduct an examination or procedure on a patient while the patient is under anaesthetic.

I/substitute decision-maker consent to a clinical student(s) undergoing training to:

- observe examination(s)/procedure(s) Yes No
- assist with examination(s)/procedure(s) Yes No
- conduct examination(s)/procedure(s) Yes No

A copy of this patient information sheet should be given to the patient/substitute decision-maker to read carefully and allow time to ask any questions about the procedure. The consent form and patient information sheet should be included in the patient's medical record.

In this information sheet, the word 'you' means the patient unless a substitute decision-maker is providing consent on behalf of the patient, in which case the word 'you' means the substitute decision-maker when used in the context of the person providing consent to the procedure.



1. What is the procedure and how will it help me?

(Doctor/clinician to include a brief description of the procedure and the benefit to the patient in this space)

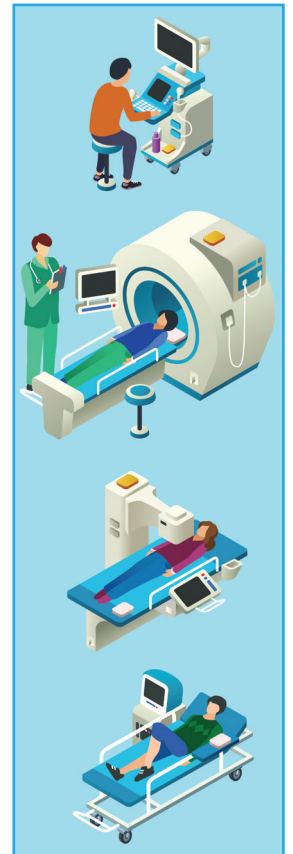


Image: Patients in a Medical Imaging department. ID: 1189785208. www.shutterstock.com

Medical imaging provides a range of services to help diagnose, monitor and treat patients. These include x-ray, computed tomography (CT), magnetic resonance imaging (MRI), ultrasound, fluoroscopy and interventional radiology.

Sometimes procedures are easier and safer when done using medical image guidance. It helps the doctor/clinician to see where their instruments are in relation to structures in your body. This can reduce the risk of some complications or make the procedure less invasive.

Preparing for the procedure

The Medical Imaging department will give you instructions on how to prepare for the procedure. It is important to follow the instructions that are given to you. Your procedure might be delayed if you don't follow all the preparation steps.

Medical imaging staff will notify you beforehand if you are required to stop taking any blood thinning medicine. List or bring all your prescribed medicines, those medicines you buy over the counter, herbal remedies and supplements to show the doctor/clinician what you are taking.

If you have been advised you will need sedation or a general anaesthetic, do not drink alcohol, smoke, vape or take recreational drugs for at least 24 hours before the procedure as these may alter the effects of the anaesthetic.

Tell your doctor/clinician if you:

- are breastfeeding or pregnant, or suspect that you may be pregnant
- have a drug or medication dependence.



2. What are the risks?

In recommending the medical imaging procedure, the doctor/clinician believes that the benefits to you from having the procedure exceed the risks involved. There are risks and possible complications associated with the medical imaging procedure which can occur with all patients – these are set out below. There may also be additional risks and possible complications specific to your condition and circumstances. Please discuss these with the doctor/clinician and ensure they are written on the consent form before you sign it. If you have any further concerns, please ensure that you raise them with the doctor/clinician prior to giving consent to the procedure.

The risks and complications with this procedure can include but are not limited to the following:

Common risks and complications

(Doctor/clinician to cross out and initial any statements in this section that are not relevant to this patient's procedure)

- minor pain, bruising and/or infection from the I.V. cannula
- pain or discomfort, which may require medication
- bleeding or bruising could occur
- bleeding/bruising is more common if you have been taking blood thinning medicines, such as warfarin, aspirin, clopidogrel (Plavix, Iscover, Coplavix), prasugrel (Effient), dipyridamole (Persantin or Asasantin), ticagrelor (Brilinta), apixaban (Eliquis), dabigatran (Pradaxa), rivaroxaban (Xarelto) or complementary/alternative medicines, such as fish oil and turmeric.

Uncommon risks and complications

- the procedure may not be possible due to medical or technical reasons
- infection requiring antibiotics and further treatment
- damage to surrounding structures such as blood vessels, organs and muscles, requiring further treatment
- an allergy to injected medications, requiring further treatment.

Rare risks and complications

- seizures and/or cardiac arrest due to local anaesthetic toxicity
- death because of a medical imaging procedure is very rare.

Anaesthetic

The procedure:

(Doctor/clinician to tick appropriate box)

- Will require an anaesthetic or sedation
- May require an anaesthetic or sedation
- Does *not* require an anaesthetic or sedation

For more information about the anaesthetic and the risks involved, please refer to the *About Your Anaesthetic* patient information sheet that has been provided to you. Discuss any concerns with your doctor/clinician.

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

Ionising radiation (x-rays)

Ionising radiation is higher energy radiation that can interact with the material it is travelling through, for example the human body. Background ionising radiation comes from the sun, soil, buildings, food, water, the air we breathe and even our own bodies¹.

(Doctor/clinician to tick appropriate box)

- Involves ionising radiation (x-rays)
- Does *not* involve ionising radiation (x-rays)

The risks of radiation exposure from this procedure need to be compared to the risks of your condition not being treated. Exposure to radiation may cause a slight increase in the risk of cancer to you over your lifetime. However, the potential risk is small compared to the expected benefit of this procedure.

If you require more information a *Medical Imaging and Radiation* patient information sheet can be provided to you.

Pregnancy

Please tell your doctor/clinician if you are breastfeeding or pregnant, or suspect that you may be pregnant. The risk to you and/or your unborn baby varies depending on the procedure, body part, stage of pregnancy and whether contrast is required.

As well as discussing the risks and benefits of having the procedure, including comparing the risks of your condition not being treated, the doctor/clinician should give you personalised information about the risk to you and your baby.².

In some circumstances, Magnetic Resonance Imaging (MRI) or ultrasound may be a suitable and safe alternative. Neither MRI or ultrasound use ionising radiation. How many weeks pregnant you are may also affect the suitability of these alternatives.

If you are pregnant and your procedure involves ionising radiation, an *Ionising Radiation During Pregnancy* information sheet will be provided for you.

Contrast

You will sometimes be given contrast as part of your procedure, so that your internal organs and structures can be seen more clearly on the images. If the radiologist (doctor) thinks it would be useful to give you contrast for this procedure, you will be asked some questions to make sure that it is safe for you to be given the contrast.

(Doctor/clinician to tick appropriate box)

Will require iodinated contrast

Will require MRI contrast

Will require other contrast:

Does *not* require contrast

Common risks and complications

- minor pain, bruising and/or infection from the I.V. cannula. This may require treatment
- (*MRI contrast only*) small amounts of gadolinium may remain in tissues of the body, including the liver, bone and brain. These small amounts of gadolinium found in tissues of the body are called gadolinium retention. The effects of gadolinium retention are an area of ongoing research.

Uncommon risks and complications

- injected contrast may leak outside of the blood vessel, under the skin and into the tissue. This may require treatment. In very rare cases, surgery could be required if the skin breaks down.

Rare risks and complications

- allergic reactions rarely occur, but when they do, they usually occur within the first hour, with most happening in the first five minutes. Late reactions have been known to occur up to 1 week after the injection. Note: allergy to topical iodine and/or seafood does not imply an allergy to iodinated contrast. The reactions vary from:
 - » mild: hives, sweating, sneezing, coughing, nausea
 - » moderate: widespread hives, headache, facial swelling, vomiting, shortness of breath
 - » severe: severe reactions are rare but include life threatening heart palpitations, very low blood pressure, throat swelling, seizures and/or cardiac arrest.

Renal impairment

- Contrast is removed from the blood by the kidneys through the urine.
- (*Iodinated contrast only*) Modern iodinated contrast dyes used in medical imaging are minimally, if at all, harmful to the kidneys³. To minimise stress to your kidneys your doctor may recommend you have extra fluid to ensure good hydration, stop some medications temporarily or have extra blood tests to monitor your kidney function around the time of your scan/procedure.

- (MRI contrast only) Nephrogenic Systemic Fibrosis (NSF) is an extremely rare condition that results in scarring or thickening of the skin and tissues throughout the body. It can occur days to years following exposure to gadolinium. It is severely disabling and often fatal. As NSF has almost only ever been seen in people with severely reduced kidney function and those on dialysis, every effort is made to avoid giving gadolinium to these patients. However, sometimes there is no good alternative and contrast is required to help rapidly and effectively diagnose serious organ and life-threatening diseases so effective treatment can be started. It is reasonable for almost all patients with kidney disease and those on dialysis to receive contrast in these circumstances.

What are the risks of not having the procedure?

There may be adverse consequences for your health if you choose not to have the proposed procedure. Please discuss these with the referring doctor/clinician.

If you choose not to have the procedure, you will not be required to sign a consent form.

If you have signed a consent form, you have the right to change your mind at any time prior to the procedure. Please contact the doctor/clinician to discuss.



3. Are there alternatives?

An alternative may be available. Your doctor/clinician will discuss the most appropriate examination for your circumstances.

Making the decision to have a procedure requires you to understand the options available. Please discuss any alternative procedure options with your doctor/clinician before signing the consent form.



4. What should I expect after the procedure?

Your healthcare team will talk to you about what to expect after your procedure and upon discharge from hospital.



5. Who will be performing the procedure?

Radiographers, doctors, nuclear medicine technologists, sonographers, nurses, and medical imaging assistants make up the medical imaging team. All or some of these professionals may be involved in your procedure.

A doctor/clinician other than the consultant/specialist may assist with/conduct the clinically appropriate procedure. This could include a doctor/clinician undergoing further training, however all trainees are supervised according to relevant professional guidelines.

If you have any concerns about which doctor/clinician will be performing the procedure, please discuss this with the doctor/clinician.

For the purpose of undertaking professional training in this teaching hospital, a clinical student(s) may observe medical examination(s) or procedure(s) and may also, subject to your consent, assist with/conduct an examination or procedure on you while you are under anaesthetic.

You are under no obligation to consent to an examination(s) or a procedure(s) being undertaken by a clinical student(s) for training purposes. If you choose not to consent, it will not adversely affect your access, outcome or rights to medical treatment in any way.

For more information on student care, please visit www.health.qld.gov.au/consent/students.



6. Where can I find support or more information?

Hospital care: before, during and after is available on the Queensland Health website www.qld.gov.au/health/services/hospital-care/before-after where you can read about your healthcare rights.

You can also see a list of blood thinning medications at www.health.qld.gov.au/consent/bloodthinner.

Further information about informed consent can be found on the Informed Consent website www.health.qld.gov.au/consent. Additional statewide consent forms and patient information sheets are also available here.

Staff are available to support patients' cultural and spiritual needs. If you would like cultural or spiritual support, please discuss this with your doctor/clinician.

Queensland Health recognises that First Nations People's culture must be considered in the patient's clinical care to ensure their holistic health and individual needs are met.



7. Questions

Please ask the doctor/clinician if you do not understand any aspect of this patient information sheet or if you have any questions about your proposed procedure.

If you have further questions prior to your appointment, please contact the Medical Imaging department via the main switchboard of the facility where your procedure is booked.



8. Contact us

In an emergency, call Triple Zero (000).

If it is not an emergency, but you have concerns, contact 13 HEALTH (13 43 25 84), 24 hours a day, 7 days a week.

References:

1. Australian Radiation Protection and Nuclear Safety Agency (ARPANSA). Ionising radiation in our everyday environment, 2021. Available from www.arpansa.gov.au
2. The Royal Australian and New Zealand College of Radiologists®, Diagnostic Radiology and Pregnancy V2.0 Position Statement, 2017, and ARPANSA, Code for Radiation Protection in Medical Exposure Radiation Protection Series C-5. Available from: www.arpansa.gov.au/regulation-and-licensing/regulatory-publications/radiation-protection-series/codes-and-standards/rpsc-5
3. Davenport MS, Perazella MA, Yee J, et al. Use of Intravenous Iodinated Contrast Media in Patients with Kidney Disease: Consensus Statements from the American College of Radiology and the National Kidney Foundation. *Radiology* 2020;294:660–668.