



Queensland Government

# Aspiration/Drainage (Image-Guided) Consent

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?

### Complete for ADULT patient only

- 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:

### Complete for CHILD/YOUNG PERSON patient only

- Yes Although the patient is a child/young person, the patient may be capable of giving informed consent and having sufficient maturity, understanding and intelligence to enable them to fully understand the nature, consequences and risks of the proposed procedure and the consequences of non-treatment – ‘Gillick competence’ (*Gillick v West Norfolk and Wisbech Area Health Authority* [1986] AC 112)  
 → **GO TO section B**
- No Parent/legal guardian/other person\* with parental rights and responsibilities to provide consent and complete this form  
 → **COMPLETE section A**

\*Formal arrangements, such as parenting/custody orders, adoption, or other formally recognised carer/guardianship arrangements. Refer to the Queensland Health ‘Guide to Informed Decision-making in Health Care’ and local policy and procedures. Complete the source of decision-making authority as applicable below.

If applicable, source of decision-making authority (*tick one*):

- Court order →  Court order verified  
 Legal guardian →  Documentation verified  
 Other person →  Documentation verified

Name of parent/legal guardian/other person:

Relationship to child/young person:

## 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 OR substitute decision-maker OR parent/legal guardian/other person confirms the following procedure(s)

I confirm that the referring doctor/clinician has explained that I have been referred for the following procedure:

Aspiration/drainage (image-guided):  Yes  No

Site/side of procedure:

Name of referring doctor/clinician:

## D. Risks specific to the patient in having an aspiration/drainage (image-guided)

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

## E. Risks specific to the patient in not having an aspiration/drainage (image-guided)

(Doctor/clinician to document specific risks in not having an aspiration/drainage [image-guided]):

## F. Alternative procedure options

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

DO NOT WRITE IN THIS BINDING MARGIN

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SW9581

ASPIRATION/DRAINAGE (IMAGE-GUIDED) CONSENT



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(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex:  M  F  I

## 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 OR substitute decision-maker OR parent/legal guardian/other person.

I have explained to the patient OR substitute decision-maker OR parent/legal guardian/other person 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 OR substitute decision-maker OR parent/legal guardian/other person consent

I acknowledge that the doctor/clinician has explained:

- the 'Aspiration/Drainage (Image-Guided)' 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:
  - an adult patient will be treated based on documented discussions (e.g. AHD or ARP [Acute Resuscitation Plan])
  - a child/young person's health care will be provided in accordance with good clinical practice and in the best interests of the patient
- 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.

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/parent/legal guardian/other person have received the following consent and patient information sheet(s):

- 'Aspiration/Drainage (Image-Guided)'
- 'Computed Tomography (CT) Scan'
- 'Ultrasound' (*Adult patient only*)
- 'Ultrasound' (*Child/young person patient only*)
- 'About Your Anaesthetic' (*Adult patient only*)
- 'About Your Child's Anaesthetic' (*Child/young person patient only*)
- 'Blood and/or Manufactured Blood Products Transfusion (Full/Limited Consent)' (*Adult patient only*)
- 'Transfusion Consent: Fresh and/or Manufactured Blood Products (Full/Limited Consent)' (*Child/young person patient only*)

On the basis of the above statements,

## 1) I/substitute decision-maker/parent/legal guardian/other person consent to having an aspiration/drainage (image-guided).

Name of patient/substitute decision-maker/parent/legal guardian/other person:

Signature:

Date:

If the patient is a child/young person:

- I am not aware of any legal or other reason that prevents me from providing unrestricted consent for this child/young person for this procedure (*not applicable if the child/young person is Gillick competent and signs this form*).

## 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 OR substitute decision-maker OR parent/legal guardian/other person consent, assist with/ conduct an examination or procedure on a patient while the patient is under anaesthetic.

I/substitute decision-maker/parent/legal guardian/other person 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

# Aspiration/Drainage (Image-Guided)

Adult and Child/Young Person | Informed consent: patient information

**A copy of this patient information sheet should be given to the patient or substitute decision-maker or parent/legal guardian/other person of a child or young person 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.**

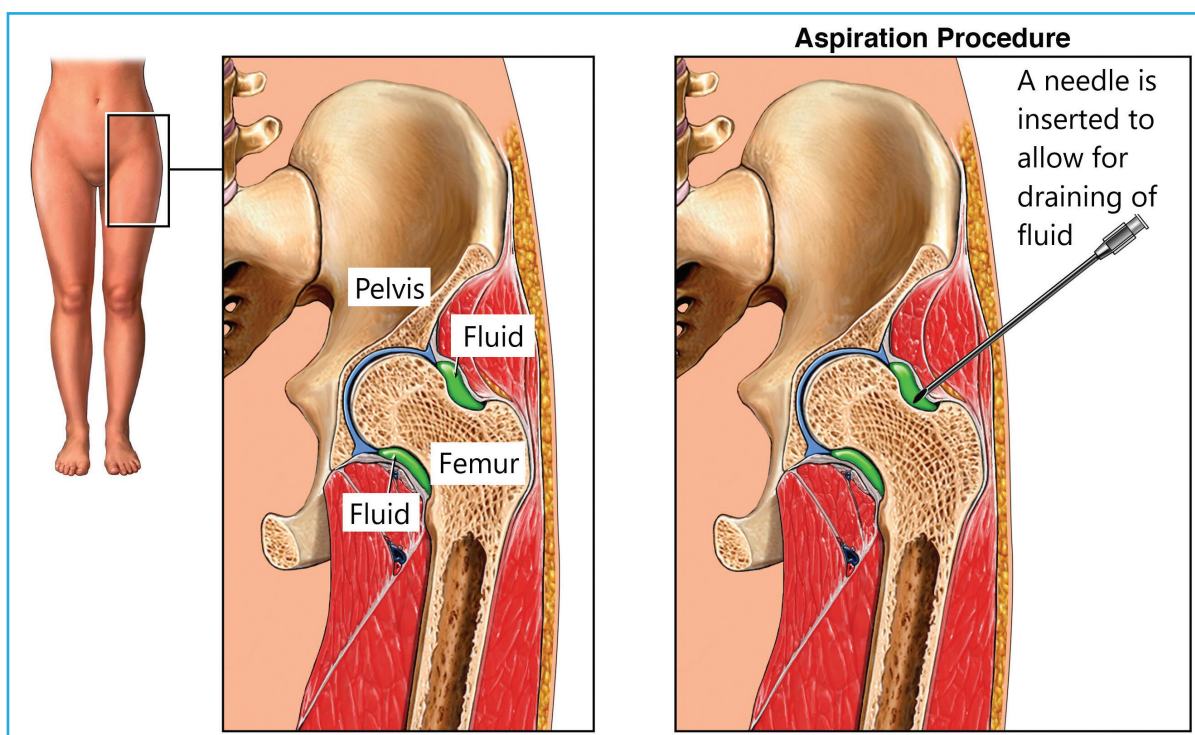
*In this information sheet, the word 'you' means the patient unless a substitute decision-maker, parent, legal guardian or other person is providing consent on behalf of the patient, in which case the word 'you' means the substitute decision-maker, parent, legal guardian or other person when used in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



## 1. What is an aspiration/drainage (image-guided) and how will it help me?

An aspiration or drainage is a procedure that removes fluid from a collection of fluid in the body. This can be done as a treatment, for diagnosis of pathology, or to reduce discomfort. A fluid collection may contain clear fluid, pus or blood. Most fluid collections are accessible via a needle through the skin.

An **aspiration** is where a needle is inserted into the fluid collection and some or all of the fluid is withdrawn. A sample is taken for testing in the Pathology department.



*Image: Needle aspiration of hip joint (adapted).*

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A **drainage** means that a soft tube (drain) will be inserted into the fluid collection and left in place to drain the fluid until the collection is gone.

Ultrasound and or Computed Tomography (CT) scans are used during the procedure to check the needle's position.

For more information on Ultrasound and CT, please read the patient information sheets *Ultrasound* and *Computed Tomography (CT) Scan*. If you do not have the appropriate information sheet, please ask for one.

## 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 of the preparation steps.

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

This procedure will require the use of a local anaesthetic and possibly a mild sedation. If you received sedation and are being discharged on the same day, you cannot drive and you must have someone available to escort you home.

Do not drink any alcohol, smoke, vape or take recreational drugs for at least 24 hours before the procedure as these may alter the effects of the sedative.

Please tell your doctor/clinician if you:

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

You may be required to change into a hospital gown and remove some of your jewellery.

It is very important you lie still.

Supporting straps, foam pads and light weights may be used to help you to remain still. If you are unable to lie still, a mild sedative may be needed for adults, or rarely, a general anaesthetic. A general anaesthetic may be required for a child/young person.

## Sedation

Sedation is the use of medicines that help make you feel relaxed and drowsy for your procedure. You may remember some or little about what has happened. You may still be aware of your surroundings and should be able to follow simple instructions, such as holding your breath when instructed by the doctor/clinician.

If you are booked for an anaesthetic or sedation, please read the information sheet *About Your Anaesthetic (for adults)* or *About Your Child's Anaesthetic (for child/young person)*. If you do not have one of these information sheets, please ask for one.

### **For a parent/legal guardian/other person of a patient having an aspiration/drainage (image-guided)**

To prepare the patient for this procedure and to ease their concerns, tell them what they can expect to happen during the procedure. This information sheet will assist you with this.

We welcome your help and support in preparing the patient for the procedure and in explaining why it's so important to lie still.

At the discretion of the procedure staff:

- a parent/adult (unless pregnant) may be invited into the procedure room to support the patient
- if the patient is having a general anaesthetic you may be able to see them off to sleep. Once they are asleep, you will be asked to leave the procedure room and wait in the waiting area.

Other children are not allowed into the procedure room, and they must be supervised at all times by another parent/adult.

## During the procedure

An intravenous (I.V.) cannula is a small plastic tube that will be inserted into a vein, usually in your hand or arm. This is for any medication or fluids required during the procedure, including sedation.

Images will be taken of the fluid collection and your skin may be marked with a pen during planning.

Your skin will be cleaned around the area marked and a sterile drape will be applied to cover the area. Local anaesthetic will be injected to numb your skin at the procedure site.

Images will be used to guide the doctor/clinician as they insert a needle. Once the needle is in the fluid collection, a small sample will be taken for testing.

**Aspiration:** As much of the fluid collection will be aspirated using the needle. The needle will be removed, and a dressing applied.

**Drainage:** A soft tube (drain) is inserted into the fluid collection. The tube is connected to a drainage bag to collect the fluid. The tube may be stitched to the skin to avoid accidental removal, and a dressing will be applied. The doctor/clinician will discuss with you how long the drain needs to stay in.

If the I.V. cannula is no longer required, it will be removed.



## 2. What are the risks?

In recommending the 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 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 which the doctor/clinician will discuss with you. If you have any further concerns, please ensure that you raise them with the doctor/clinician prior to giving consent to the procedure.

### Common risks and complications

- minor pain, bruising and/or infection from the I.V. cannula
- pain or discomfort at the procedure site
- bleeding or bruising at the procedure site
- bleeding and 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
- the drain may become kinked or blocked and may need to be moved or replaced
- nerve damage, which is usually temporary and should get better over time.

### 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 tissues and structures such as blood vessels, organs and muscles, requiring further treatment
- excessive bleeding from the puncture site, requiring other treatment and/or corrective surgery
- an allergy to injected medication, requiring further treatment.

### Rare risks and complications

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

### If a general anaesthetic or sedation is given, extra risks include:

- faintness or dizziness, especially when you start to move
- fall in blood pressure
- nausea and vomiting
- leg weakness
- heart and lung problems, such as heart attack or pneumonia
- stroke resulting in brain damage.

### Risks of radiation (for those having a CT scan)

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<sup>1</sup>.

### What are the risks of not having an aspiration/drainage (image-guided)?

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?

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, and what level of activity is suitable after your procedure.

Recovery time varies depending on the puncture site, the anaesthetic given and your age. This can take 2 to 6 hours.

If a sample of fluid has been taken for testing at the Pathology department, you will receive the results from your treating team. This may take up to 7 days.

If a drainage tube has been left in, take care not to pull the tube. Notify staff or your GP if the tube has fallen out. If you have a drain inserted, you may need an injection of local anaesthetic before it is removed. You should feel no more than mild discomfort when it is removed. No sedation or general anaesthetic is required. The doctor/clinician will tell you how to breathe when the tube is removed. Some stitches may be needed to close the wound. The doctor/clinician will tell you when the stitches are to be removed and when to take the dressing off.

Go to your nearest Emergency department or GP (your local doctor) if you become unwell or have:

- pain, unrelieved by simple pain relievers
- continuous bleeding, swelling, redness or inflammation at the puncture site
- fever
- other warning signs the doctor/clinician may have asked you to be aware of.

If you had sedation, this will affect your judgement for about 24 hours. For your own safety:

- Do NOT drive any type of car, bike or other vehicle.
- Do NOT operate machinery including cooking equipment.
- Do NOT make important decisions or sign a legal document.
- Do NOT drink alcohol, smoke, vape or take recreational drugs. They may react with the anaesthetic medications.



### 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](http://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](http://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](http://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](http://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 Aboriginal and Torres Strait Islander patients will experience the best clinical care when their culture is included during shared decision-making.



## 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](http://www.arpansa.gov.au)