Fractured Humerus

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)

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

Left arm □ Yes □ No
Right arm □ Yes □ No

The following will be performed:
This procedure is the placement of intermedullary nails with crossing screws and/or plate and screws or manipulation with plaster fixation to the humerus.

C. Risks of a fractured humerus
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:
- Skin death can occur under the tourniquet used in the operation. This may require further dressings and/or surgery and skin grafting.

D. Significant risks and procedure options
(Doctor to document in space provided. Continue in Medical Record if necessary.)

E. 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)
Fractured Humerus

G. Patient consent

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 OR
- Anaesthetic: Nerve Block
- Fractured Humerus

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,

H. Doctor/delegate Statement

I have explained to the patient all the above points under the Patient Consent section (G) and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor/delegate:

Designation:

Signature:

Date:

I. Interpreter’s statement

I have given a sight translation in

(state the patient’s language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

Name of Interpreter:

Signature:

Date:
1. What do I need to know about this procedure?
This procedure is the placement of intermediullary nails with crossing screws and/or plate and screws or manipulation with plaster fixation to the humerus.

2. My anaesthetic
This procedure will require an anaesthetic.

See About Your Anaesthetic OR Anaesthetic: Nerve Block 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 Icover) 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:
- Skin death can occur under the tourniquet used in the operation. This may require further dressings and/or surgery and skin grafting.
- Numbness may occur at the site where the tourniquet was placed due to nerve and muscle damage, caused by the tourniquet. This may be temporary or permanent. This may require further surgery.
- Damage to nerves and/or vessels can occur during surgery. This may or may not be permanent. This may require further surgery.
- There can be permanent numbness and/or weakness in the forearm and wrist and hand following surgery.
- Stiffness in the joints may occur above and below where the arm was broken.
- Build up of pressure in the muscle compartment, which can require re-operation.

- Damage to the vessels requiring repair.
- Inability to close the edges of the wound together. This may require skin grafts.
- The bones do not knit together properly. This may require further surgery and/or bone graft.
- The bone may heal with a bend and/or alignment.
- Inability to stretch the wrist, fingers, thumbs. Further surgery may be needed to correct this.
- Abnormal pain response to surgery with worsening of pain and disability.
- The surgical cut may cause changes to the sensation and colour of the limb.
- In some people, healing of the wound may be abnormal and the wound can be thickened and red and the scar may be painful.

Notes to talk to my doctor about:

<table>
<thead>
<tr>
<th>Risk Description</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Damage to vessels</td>
<td>Requires repair</td>
</tr>
<tr>
<td>Inability to close edges</td>
<td>Skin grafts needed</td>
</tr>
<tr>
<td>Bones do not knit</td>
<td>Further surgery and/or bone graft</td>
</tr>
<tr>
<td>Bone may heal with bend</td>
<td>Further surgery needed to correct</td>
</tr>
<tr>
<td>Inability to stretch</td>
<td></td>
</tr>
<tr>
<td>Surgical cut causes changes to sensation and colour</td>
<td></td>
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<tr>
<td>Healing of wound is abnormal</td>
<td></td>
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</tbody>
</table>

Consent Information - Patient Copy
Fractured Humerus