General risks

They include but are not limited to the following.

There are risks and complications with this procedure.

A cystoscopy is where the doctor looks and examines
the inside of the bladder and urethra using a fine
related to the procedure)

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 cystoscopy is where the doctor looks and examines
the inside of the bladder and urethra using a fine
telescopic-type instrument called a cystoscope.

The prostate gland is examined internally. A prostate
gland biopsy is a test to remove small samples of
prostate tissue to be examined under a microscope.

The tissue is collected through a needle, which is
passed through the skin between the back of the
scrotum and the anus or through the rectal wall.

C. Risks of a cystoscopy & biopsy of
prostate

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:

- There is a rare possibility of infection from the
  procedure.
- Bleeding may occur and this may stain the urine
  resulting from the procedure.
- 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.

D. Risks of not having this procedure

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

E. Anaesthetic

This procedure may require an anaesthetic. (Doctor to
document type of anaesthetic discussed)
F. 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
- Cystoscopy & Biopsy of Prostate

- 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,

I request to have the procedure

Name of Patient:..........................................................

Signature:..................................................................

Date:..................................................................

Patients who lack capacity to provide consent

Consent must be obtained from a substitute decision maker/s in the order below.

- Does the patient have an Advance Health Directive (AHD)?
- Name of Substitute Decision Maker/s:
- Signature:
- Relationship to patient:
- Date:.......................... PH No:..........................
- Source of decision making authority (tick one):
- Tribunal-appointed Guardian
- Attorney/s for health matters under Enduring Power of Attorney or AHD
- Statutory Health Attorney
- If none of these, the Adult Guardian has provided consent. Ph 1300 QLD OAG (753 624)

G. 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:..................................................................

H. Interpreter’s statement

I have given a sight translation in

(\textit{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?
A cystoscopy is where the doctor looks and examines the inside of the bladder and urethra using a fine telescopic-type instrument called a cystoscope. The prostate gland is examined internally. A prostate gland biopsy is a test to remove small samples of prostate tissue to be examined under a microscope. The tissue is collected through a needle, which is passed through the skin between the back of the scrotum and the anus or through the rectal wall. They include but are not limited to the following.

- Damage to the bladder by puncturing the bladder wall. This may need further surgery.
- 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.

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.
- Delayed bleeding may occur 1 or 2 weeks after the biopsy.
- Swelling at the exit of the bladder which may result in urine retention. A tube (catheter) may need to be inserted to drain the urine until the swelling goes down.
- Bleeding may occur and this may stain the urine colour and sometimes cause blockage of urine flow. Delayed bleeding may occur 1 or 2 weeks after the biopsy.
- Burning and scalding of urine may occur for a few days after the procedure. This usually settles.
- A serious but rare possibility of infection from the bladder and prostate getting into the blood stream, causing septicaemia, a serious infection for all of the body. This may require treatment with antibiotics.

Notes to talk to my doctor about: