



Queensland  
Government

# Computed Tomography (CT) Cardiac Scan 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:

Computed Tomography (CT) cardiac scan:  Yes  No

Name of referring doctor/clinician:

## D. Risks specific to the patient in having a Computed Tomography (CT) cardiac scan

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

## E. Risks specific to the patient in not having a Computed Tomography (CT) cardiac scan

(Doctor/clinician to document specific risks in not having a Computed Tomography [CT] cardiac scan):

## 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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SW9603

CT CARDIAC SCAN CONSENT



# Computed Tomography (CT) Cardiac Scan Consent

(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 'Computed Tomography (CT) Cardiac Scan' 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 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):**

- 'Computed Tomography (CT) Cardiac Scan'
- 'About Your Child's Anaesthetic' (*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 a Computed Tomography (CT) cardiac scan.

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

# Computed Tomography (CT) Cardiac Scan

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

**A copy of this patient information sheet should be given to the patient/substitute decision-maker/parent/legal guardian/other 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 a Computed Tomography (CT) cardiac scan and how will it help me?

Computed Tomography (CT) scans produce cross-sectional images of the body using x-ray radiation.

The CT machine looks like a large doughnut with a narrow table in the middle. The table moves through the circular hole in the centre of the scanner. The CT machine is open at both ends.

A CT cardiac scan looks at the heart and its blood vessels. It is used to diagnose and/or monitor a variety of heart conditions.

Iodinated contrast (also known as x-ray dye) is required for most CT cardiac scans as it highlights the heart and blood vessels around it, showing the blood flow. Before you are given iodinated contrast we will ask you some questions to make sure it is safe for you.



*Image: A patient entering a CT scanner, assisted by a radiographer. ID: 167757581.  
[www.shutterstock.com](http://www.shutterstock.com)*

## Preparing for the procedure

The Medical Imaging department will give instructions on how to prepare for the procedure. Your procedure may be delayed if you don't follow all of your preparation requirements.

Please tell the staff if you are breastfeeding or pregnant, or suspect that you may be pregnant.

The CT scan itself will not cause you any pain. It is important that you lie still for the procedure. Supporting straps, foam pads and light weights may be used to help with this. If a child/young person is unable to lie still, a general anaesthetic may be required. Sedation or a general anaesthetic would need to be organised prior to the date of your scan. Please contact the Medical Imaging department to discuss.

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

### For parents/guardians of a patient having a CT cardiac scan

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. An informational video can be found using the following link: [www.childrens.health.qld.gov.au/service-medical-imaging-ct-scan/](http://www.childrens.health.qld.gov.au/service-medical-imaging-ct-scan/).

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/guardian/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/guardian/adult.

## During the procedure

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

You will be positioned on the CT table by a radiographer. The radiographer will not be in the room during the scan, but they will be able to see you through a large glass window and speak with you via an intercom.

The skin on your chest may be cleaned or possibly shaved prior to placement of electrode stickers. Electrocardiogram (ECG) lead wires will be connected to stickers on your chest and record a tracing of your heartbeat.

Depending on your medical condition, contrast may be needed to better see your heart and blood vessels. If contrast needs to be given it is administered via an intravenous (I.V.) cannula. An I.V. cannula is a small plastic tube inserted into a vein using a needle, usually in your hand or arm.

When the contrast is injected, you may feel:

- a very warm or 'flushed' feeling over your body, this may also make you think you have passed urine. You will not pass urine – it is only a feeling
- a 'metallic' taste or smell. This usually lasts less than a minute.

Your heart rate, blood pressure and oxygen levels will be monitored. If your heart rate hasn't slowed down enough for the scan, you may be given a medication to help slow your heart down. This provides clearer CT images for the Radiologist (doctor). You may also be given a medication to help enlarge your arteries.

During the scan, the table will move through the CT scanner and a whirring or humming sound may be heard. You should remain as still as possible, as the slightest movement can blur the images.

It may take up to an hour for your CT cardiac scan including preparation time. The actual time spent on the CT table is about 10–15 minutes. For some scans, you will be asked to hold your breath for up to 20 seconds.

If you had an I.V. cannula and it is no longer required, it will be removed.

You may be asked to wait in the department under observation for up to half an hour after I.V. contrast.



## 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.

There are side effects of the medications that may be used in this procedure. They can include but are not limited to the following:

- light headedness or dizziness
- fatigue and weakness, shortness of breath
- headaches, nausea
- low blood pressure
- dry mouth, blurred vision
- abnormal heartbeat.

## Common risks and complications

- minor pain, bruising and/or infection from the IV cannula. This may require treatment
- bruising is more common if you have been taking blood thinning drugs, 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

- an allergy to the medications used, requiring further treatment
- the procedure may not be possible due to medical and/or technical reasons
- (*I.V. iodinated contrast only*) injected contrast may leak outside the blood vessel, under the skin and into the tissues. This may require treatment. In very rare cases, surgery may be required if the skin breaks down around the injection site.

## Rare risks and complications

- (*I.V. iodinated contrast only*) 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, but these delayed reactions are mild. 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, headaches, 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
- cardiac arrest
- death because of this procedure is very rare.

## Risks of radiation

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>.

## Precautions

As contrast is not suitable for some people, you will be asked a series of questions before the contrast is given. The answers allow staff to identify any risk factors that you may have.

## Kidney function

- Contrast is removed from the blood by the kidneys through the urine.
- Modern contrast used in CT scanning is minimally, if at all, harmful to the kidneys. CT scans with contrast can be safely performed in patients with kidney disease as clinical studies have not proven increased risk of worsened kidney function or increased need for dialysis<sup>2</sup>. When significant worsening of kidney function is seen, there is often more than one factor causing stress to the kidneys such as certain medications, infection, dehydration or low blood pressure. To minimise stress to your kidneys your doctor/clinician 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 contrast CT scan.
- You may also be asked to have a blood test so we can find out how well your kidneys are functioning.

## What are the risks of not having a CT cardiac scan?

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 the patient/substitute decision-maker/parent/legal guardian/other person to understand the options available. Please discuss any alternative procedure options with your referring doctor/clinician before signing the consent form.

Your doctor/clinician will discuss with you the most appropriate procedure for your circumstances.



### 4. What should I expect after the procedure?

It is recommended that you drink 2 to 4 glasses of water after the procedure to help flush the contrast from the body. Contrast will not affect your ability to carry out normal activities; you should be able to continue with your day as normal.

You will receive the results of your CT scan from your treating team.

The Radiologist (doctor) will review the final images after the procedure and send the report to your treating team. You will receive the results of your CT scan from your treating team at your next follow-up appointment. Please make an appointment if you do not already have one.



### 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 a patient while the patient is 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 medical condition, treatment options and 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 [www.arpansa.gov.au](http://www.arpansa.gov.au)
2. 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 Jan 21;294:660–668].