Intussusception Repair
Child / Young Person (under 18 years)

Facility:

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/your child has 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:

Surgical repair of the area of the bowel, which has slipped inside another piece of bowel.

C. Risks of an intussusception repair

There are risks and complications with this procedure. They include but are not limited to the following.

General risks:
• Infection can occur which may require treatment including antibiotics.
• 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 or Aspirin.
• Small areas of the lung can collapse, increasing the risk of chest infection. This may need antibiotics and physiotherapy.
• Impaired circulation may occur to a limb or to an organ which may require further treatment
• Death or brain damage as a result of this procedure are possible.

Specific risks:
• Deep bleeding inside the abdomen. This may need fluid replacement or further surgery.
• Damage of the bowel, which may cause leakage of bowel fluid. This may need further surgery.
• The bowel movement may be slow to return to normal after surgery. This may cause a build-up of fluid in the bowel with bloating of the tummy and vomiting. Further treatment may be necessary for this.
• Infections such as pus inside the abdomen. This may need surgical drainage.
• Part of the bowel may need to be removed due to irreversible damage.
• In some children, healing of the wound may be abnormal. The wound can be thickened and red and may be painful.
• A haemorrhage caused by a weakness in the wound. This may need further surgery.
• Adhesions (bands of scar tissue) may form and cause blockage of the bowel. This can be a short term or a long-term complication and may need further surgery.
• The intussusception may come back.

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)

G. Parent / patient / substitute decision maker consent

I acknowledge that the doctor has explained to me and/or my child:
• the 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/my child.
I request that my child has the procedure
Name of parent / Substitute Decision Maker/s: __________________________
Signature: __________________________
Relationship to patient: __________________________
Date: __________________________
PH No: __________________________

If applicable: source of decision making authority (tick one):
☐ Court order ➔ ☐ Court order verified
☐ Legal guardian ➔ ☐ Documentation verified
☐ Other: __________________________ ➔ ☐ Documentation verified

AND / OR for the young person
Based on Gillick vs West Norfolk Area Health Authority [1986]
1AC 112 a minor (i.e a patient under 18 years of age) is capable
of giving informed consent when he or she achieves a sufficient
understanding and intelligence to enable him or her to fully
understand the nature, consequences and risks of the proposed
procedure/treatment and the consequences of non-treatment.

I request to have this procedure
Name of patient: __________________________
Signature: __________________________
Date: __________________________

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?
Surgical repair of the area of the bowel, which has slipped inside another piece of bowel.

2. My anaesthetic:
This procedure will require an anaesthetic.
See About Your Child’s 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 which may require treatment including antibiotics.
- 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 or Aspirin.
- Small areas of the lung can collapse, increasing the risk of chest infection. This may need antibiotics and physiotherapy.
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**Specific risks:**
- Deep bleeding inside the abdomen. This may need fluid replacement or further surgery.
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- Part of the bowel may need to be removed due to irreversible damage.
- In some children, healing of the wound may be abnormal. The wound can be thickened and red and may be painful.
- A hernia caused by a weakness in the wound. This may need further surgery.
- Adhesions (bands of scar tissue) may form and cause blockage of the bowel. This can be a short term or a long-term complication and may need further surgery.
- The intussusception may come back.

4. Who will be performing the procedure?
A doctor other than the consultant/specialist may conduct/assist with the clinically appropriate procedure/treatment/investigation/examination.
I understand this could be a doctor undergoing further training, and that 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 with the doctor/clinician.
For the purpose of undertaking professional training in this teaching hospital, a student/s may observe the medical examination/s or procedure/s.
Subject to your consent, a student/s may perform an examination/s or assist in performing the procedure/s while you are under anaesthetic. This is for education purposes only. A student/s who undertakes an examination/s or assists in performing the procedure/s will be under the supervision of the treating doctor, in accordance with relevant professional guidelines.
If you choose not to consent, it will not adversely affect your access, outcome or rights to medical treatment in any way. You are under no obligation to consent to an examination/s or a procedure/s being undertaken by a student/s for education purposes.

**Notes to talk to my doctor about:**

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