

Surgical Associates

30 Perimeter Park Drive
Suite 200

Atlanta, GA 30341

Phone: 800-987-6543

Fax: 770-736-5725

Website: www.surgicalassociates.com

Patient Medical Record (write in or apply sticker)

Name _____

Med Record No. _____

DOB _____

Admitting MD _____

Appendix - Appendectomy (Laparoscopic) (Appendectomy (Laparoscopic))

The Procedure

I request John Smith to do the following procedure: Appendix - Appendectomy (Laparoscopic) (Appendectomy (Laparoscopic))

Communication with my Doctor

John Smith has explained the following information:

- **Operation/procedure**:

This procedure involves removing the appendix. Your surgeon will make several small incisions in the skin on the abdomen. They will usually be over the appendix.

Laparoscopic surgery is done using a scope and hollow tube(s) called ports. These are inserted through small cuts in the abdomen. A scope is a thin, lighted instrument with a camera attached. It lets the surgeon see inside the abdomen. The surgeon can pass tools through the ports. Carbon dioxide gas is pumped into the abdomen. This helps the surgeon see inside the abdomen. It also gives more room to work. Your surgeon may not be able to complete the procedure using a scope. If the surgery is not done with a scope, it may be done through a larger cut.

Your surgeon will check nearby structures. The attachments of the appendix to the bowel and the abdomen will be carefully cut and sealed. The appendix will be removed.

Your surgeon will close the cut with stitches, staples, strips of tape, or other ways. A temporary drain may be placed. This will allow fluid to drain from the inside to the outside of the abdomen.

- **Illness or medical condition**:

Appendicitis. This is inflammation and infection of the appendix. The appendix is a tube-like structure attached to the large intestine near where it joins with the small intestine. Appendicitis results in pain and infection in the abdomen.

- **Treatment options**:

- * Antibiotic medicines to treat the infection.
- * Removing the appendix through one larger incision (open procedure).
- * You may choose not to have this procedure.

- **Prognosis** and possible risks if I do not have the operation/procedure:

If you choose not to have this procedure, your appendix may rupture. Infection may spread. A ruptured appendix may cause death.

- **Risks** of the operation/procedure:
 - * Another source of your problem may be found during the procedure.
 - * Pain, numbness, swelling, weakness or scarring where tissue is cut.
 - * Scar(s). Scars may be painful. They may limit function or range of motion. They also may not look the way you want them to.
 - * The gas used in laparoscopic procedures to inflate the abdomen can become trapped in tissues. Gas in the bloodstream can dangerously affect blood flow and heart function.
 - * The procedure may not cure or relieve your condition or symptoms. They may come back and even worsen.
 - * You may need additional tests or treatment.
 - * Your doctor may not be able to complete the procedure using a scope or robotics. Your doctor may have to make a bigger cut to do the procedure.
 - * Bleeding. You may need blood transfusions or other treatments. This may be discovered during the procedure, or later.
 - * Chest pain. Chest pressure.
 - * Embolism. An embolism is an object that moves through your body in your bloodstream. It can be an air bubble, a blood clot, a piece of fat or other material. It can block a blood vessel. This can lead to stroke, pulmonary embolism (blockage of the main artery of the lung), or injury to organs or extremities.
 - * Infection.
 - * Rapid or irregular heartbeat.
 - * Bladder problems after surgery. You may need a tube to drain urine. You may need other procedures.
 - * Breathing problems. You may need a breathing tube or other treatment.
 - * Damage to the bladder or nearby structures. This may be discovered during the procedure, or later. You may need a catheter or surgery.
 - * Urinary tract problems after procedure. This can include difficulty holding urine, frequent urination, bleeding and pain. These may be temporary or permanent.
 - * Wound infection, poor healing or reopening. Blood or clear fluid can also collect at the wound site(s).
 - * An abscess or build-up of pus may form. It may require drainage or additional surgery.
 - * Bowel obstruction (blockage).
 - * Damage to the bowel or nearby structures, possibly requiring an ostomy. An ostomy is an opening in the abdominal wall. It allows stool to drain into a bag. This damage may be discovered during the procedure, or later.
 - * Damage to the intestines or nearby structures. This may be discovered during the procedure, or later.
 - * Fistula. An abnormal connection between channels in your body. This can include the rectum, bladder, urethra, prostate (in men) or vagina (in women).
 - * Incisional hernia. Weak scar tissue may allow tissue to bulge through the cut.
 - * Leak of bowel contents at the procedure site.
 - * The instrument(s) placed in your abdomen can cause injuries to nearby structures. The equipment used to control bleeding can cause burning injuries.
 - * Damage, blockage, or sudden closure of blood vessels which may become an emergency.
 - * Death.

In addition to the risks listed above, any health or disease factors that I/my child has that could increase my risks has been explained.

- **Benefits** of the operation/procedure:
This procedure removes the infected organ. This may relieve pain. It may help your symptoms in the abdomen.
- **Site or location** of the operation/procedure:
See description of treatment/procedure.
- **Expectations – how to prepare** for my operation:
Before your operation:
 - * If you have had anything to eat or drink close to the time of your surgery, please notify your doctor.
 - * General anesthesia is usually given during this procedure. You should not drive or make critical decisions for 24 hours after the procedure. You will need someone to drive you home if you are released the same day. You should have a responsible adult available to help you the rest of the day.
- **Expectations – recovery** – including information on medication, nutrition, pain control, return to activity and wound care:
Activity:
 - * Most patients will be required to stay overnight. Depending on what your doctor finds during your surgery, you may need to stay in the hospital longer. Your doctor will discuss the length of your hospital stay with you.
 - * Do not lift anything over 15 pounds. Do not do strenuous physical activity until your doctor allows, including lifting or straining.
 - * You can return to work or school when you feel well enough and are no longer needing strong prescription pain medicines. Most patients can return to school or work in three to seven days as long as no lifting or straining is involved.
Diet:
 - * Eat high-fiber foods to avoid straining during bowel movements. If you are on pain medicine, your doctor may prescribe a stool softener to aid this process as well.
Wound care:
 - * Your wound will be covered with a bandage, surgical glue, or a sterile dressing. Leave the wound covered for 48 hours. Change the dressing if it gets wet.
 - * Do not soak in a bathtub until your wound cover is removed. Taking a shower is OK. Avoid getting the bandage, or your wound, wet.
 - * If your wound is closed with strips of tape, leave them in place until they fall off.
 - * A small amount of drainage is normal. If the drainage is red, has a bad odor, or covers your entire dressing, call your surgeon.
Follow-up care:
 - * Call your surgeon to schedule your follow-up visit.
 - * You will recover faster if you get up and start walking within hours after your operation.
 - * Observe your wound for any signs of infection.
 - * Take medication for pain as needed.
 - * Do not drive, operate machinery, or make any important business or legal decisions if you are taking narcotic pain medication.

Call your doctor if you:

- * Are unable to urinate.
- * Have a fever greater than 101.5 degrees Fahrenheit.
- * Have increased pain or pain that will not go away.
- * Have difficulty breathing.
- * Vomit.
- * Notice swelling, redness, bleeding, or drainage with a bad odor from your wound site.

Consent for Treatment

By signing below, I agree that:

- I have read this form or it was read to me.
- I understand the explanation of the benefits and possible risks.
- I understand my other options and what would happen if I have no treatment.
- I was able to ask questions and they have been answered to my satisfaction.
- I was given the opportunity to have a support person/interpreter present
- I choose to have this procedure/operation done and authorize John Smith to complete the procedure and his/her designated associates to assist with the operation.
- I consent to any other emergency procedure required to treat a life-threatening event during the operation.
- I consent to the disposal of any tissues or parts that may be removed during the procedure.
- I understand that no guarantee has been made that the procedure/operation will improve the condition.

Signature of patient or person authorized to give consent (Relationship to patient) 12/9/10
Date

Witness to Patient signature 12/9/10
Date

I believe that the patient/substitute decision-maker fully understood the review of the operation.

Signature of physician 12/9/10
Date

Medical Record Note

Surgical Associates
30 Perimeter Park Drive
Suite 200
Atlanta, GA 30341

Patient Medical Record (write in or apply sticker)

Name _____

Med Record No. _____

DOB _____

Admitting MD _____

Date: 12/9/10 Time: _____ Patient present: Yes No

Patient's representative (if applicable): _____

Planned procedure/treatment: Appendix - Appendectomy (Laparoscopic) (Appendectomy (Laparoscopic))

Anatomical location/surgical site: See description of treatment/procedure.

On the above date and time John Smith discussed with the patient/patient's representative all relevant aspects of the procedure/operation, including indications, benefits, risks, and alternatives including no treatment were discussed in language that he/she could understand. The patient (or the patient's representative) indicated understanding of the discussion.

The patient (or the patient's representative) was given an opportunity to ask questions and those questions were satisfactorily answered.

I have given the patient (or the patient's representative) the opportunity to review/receive a printed copy of the consent form.

Other relevant notes from the informed consent discussion:

I have reviewed and approved this note.

Note prepared by: John Smith

Pre-Procedure Instructions

Appendix - Appendectomy (Laparoscopic) (Appendectomy (Laparoscopic))

Please be aware of the following, prior to your procedure/operation:

Before your operation:

- * If you have had anything to eat or drink close to the time of your surgery, please notify your doctor.
- * General anesthesia is usually given during this procedure. You should not drive or make critical decisions for 24 hours after the procedure. You will need someone to drive you home if you are released the same day. You should have a responsible adult available to help you the rest of the day.

Other important things you need to do to prepare for your procedure/operation:

If you have any questions or concerns please contact our office:

Phone: 800-987-6543
Email: jsmith@surgicalassociates.com
Website (if applicable): www.surgicalassociates.com
Your surgeon: John Smith

For More Information

For more information on your procedure/operation, ask your surgeon or contact the following organizations:

The American College of Surgeons

633 North Saint Clair Street
Chicago, IL 60611-3211
Patient Phone: 1-800-621-4111
Fax: 312-202-5029
<http://www.facs.org/patienteducation/>

National Institutes of Health

9000 Rockville Pike
Bethesda, Maryland 20892
Phone: Please see the **NIH Toll-Free Information Lines** and **Toll-Free Health Hotlines** on the main page of the NIH Health Information Website – see link below.
<http://health.nih.gov/>

Post-Procedure Instructions

Appendix - Appendectomy (Laparoscopic) (Appendectomy (Laparoscopic))

Please be aware of the following after your procedure/operation:

Activity:

- * Most patients will be required to stay overnight. Depending on what your doctor finds during your surgery, you may need to stay in the hospital longer. Your doctor will discuss the length of your hospital stay with you.
- * Do not lift anything over 15 pounds. Do not do strenuous physical activity until your doctor allows, including lifting or straining.
- * You can return to work or school when you feel well enough and are no longer needing strong prescription pain medicines. Most patients can return to school or work in three to seven days as long as no lifting or straining is involved.

Diet:

- * Eat high-fiber foods to avoid straining during bowel movements. If you are on pain medicine, your doctor may prescribe a stool softener to aid this process as well.

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- * Your wound will be covered with a bandage, surgical glue, or a sterile dressing. Leave the wound covered for 48 hours. Change the dressing if it gets wet.
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- * If your wound is closed with strips of tape, leave them in place until they fall off.
- * A small amount of drainage is normal. If the drainage is red, has a bad odor, or covers your entire dressing, call your surgeon.

Follow-up care:

- * Call your surgeon to schedule your follow-up visit.
- * You will recover faster if you get up and start walking within hours after your operation.
- * Observe your wound for any signs of infection.
- * Take medication for pain as needed.
- * Do not drive, operate machinery, or make any important business or legal decisions if you are taking narcotic pain medication.

Call your doctor if you:

- * Are unable to urinate.
- * Have a fever greater than 101.5 degrees Fahrenheit.
- * Have increased pain or pain that will not go away.
- * Have difficulty breathing.
- * Vomit.
- * Notice swelling, redness, bleeding, or drainage with a bad odor from your wound site.

Other important things you need to do to after your procedure/operation:

If you have any questions or concerns please contact our office:

Phone: 800-987-6543

Email: jsmith@surgicalassociates.com

Website (if applicable): www.surgicalassociates.com

Your surgeon: John Smith

For More Information

For more information on your procedure/operation, ask your surgeon or contact the following organizations:

The American College of Surgeons

633 North Saint Clair Street

Chicago, IL 60611-3211

Patient Phone: 1-800-621-4111

Fax: 312-202-5029

<http://www.facs.org/patienteducation/>

National Institutes of Health

9000 Rockville Pike

Bethesda, Maryland 20892

Phone: Please see the **NIH Toll-Free Information Lines** and **Toll-Free Health Hotlines** on the main page of the NIH Health Information Website – see link below.

<http://health.nih.gov/>