



Clarification and Consent for the Physical Examination and Therapy/Intervention

Honoured patient,

Today a diagnostic physical examination is planned, eventually including a therapeutic intervention. Because of the planned examination (and eventual therapeutic intervention during the same session) we ask you to read carefully the underlying information sheet. As an informed consent please sign at the bottom. If you have any further questions, please get in touch with your family doctor. He or she will certainly be willing to answer them.

Why do we need this data sheet?

We would like to inform you about the course of the examination, the direct possible interventions including their risks. At the same time we would like to offer you the possibility to answer your questions.

How can you help to keep the risks of complications small?

By carefully following the instructions for preparation and by answering the following questions:

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Do you have an empty stomach? (Nothing to eat within the last 6 hours and drink water within the last 2 hours) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you take any anticoagulants or blood-thinner?
(If yes, which ones?: _____) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. During the last week did you take any aspirin, alcacyl, tiatral or other kind of painkillers?
(if yes, which ones? _____) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do you have any increased bleeding tendency (even occurring during smaller injuries)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are you allergic to any medications? (If yes, which ones? _____) | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Did you suffer from any complications during earlier anaesthesias and surgeries?
(If yes, which ones? _____) | <input type="checkbox"/> | <input type="checkbox"/> |

Oesophago-Gastro-Duodenoscopy

Course of diagnostic examination: After a local anaesthesia of the throat a mobile tube will be inserted through your mouth into the oesophagus, the stomach and further to the duodenum. During this exam small biopsies (tissue samples) can be taken for further microscopic examinations.

Risks: Complications are rare: inflammation, infection, bleeding or injuries (very rare perforation) are described. Surgical revisions or interventions of those are rarely necessary. If you don't have an empty stomach you may suffer from an aspiration (stomach contents may flow into your lungs).

Behaviour after the exam: light sore throat, air or the feeling of some pressure in the stomach area are possible. If there is increasing pain, repeated vomiting or circulation problems please don't hesitate to inform us, your family doctor or the nearest hospital immediately.

see reverse side



Rectoscopy/Colonoscopy

Rectoscopy is the examination of the rectum with a rigid instrument. Depending on the result there will be taken biopsies. The removal of tumour can be done if possible with a “polypektomysling” at the same time.

Colonoscopy: A mobile instrument is inserted by the anus into the cleaned rectum and advanced until the small intestine. During this exam small biopsies can be taken for further microscopic examination. Depending on the result the following treatments can be done at the same time:
Polypectomy (removal of tumour), rectoscopy.

Risks: The examination and the removal of tissue are low risk interventions. The risk of bleeding or perforation after the removal of tumour is quite rare. This problem could require surgery. After the treatment pain and light bleeding at the anus may happen (rarely until 14days after the intervention). The increased dysfunction of the anal muscles is very rare.

Behaviour after the exam: The feeling of pressure in the belly (increased air in the bowels) can last for a few hours. If these feelings increase or if there are additional pains or even increased bleeding please do not hesitate to inform us, your family doctor or the closest hospital immediately.

Anaesthesia/Sedation/Half-Sleep

Depending on the current situation and to serve you better the examination will be performed under a short anaesthesia, sedation or some half-sleep. Severe complications are very rare.

Risks: haematoma, phlebitis, (from the perfusion), allergic reaction, tooth damage, aspiration (stomach contents may flow into your lungs). After anaesthesia you are not allowed to direct any vehicle.

The signatory has taken full notice and understanding of this consent. All my questions concerning the course of the exam including its risks have been answered.
I agree upon the examination.

Date/place:

Signature patient:

Signature physician:
