

## A DESCRIPTIVE STUDY ON CONSENT TAKING FOR SURGERIES- AN OPERATING THEATRE EXPERIENCE

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Consent is a vital requirement for surgeries. Surgeries done without consent would be considered to be causing hurt or grievous hurt under local law. A descriptive cross-sectional study was conducted over 3 months in NHSL. All 127 patients were aged above 18 years and legally competent to consent. An interviewer administered questionnaire and clinical notes were used. The mean age was 42.3 years (SD 10.8) and 40.9% (52) were females and 59.1% were males (73). Written consent was not taken from 7 (5.5%). Eighteen patients (13.2%) were not aware of the site of incision. Alternatives were not offered to 115 (90.5%). About 80% (102) were not given information of anaesthetic complications. Information of general surgical complications were not given to 30 (23.7%) and 60 were (47.2%) not informed surgery specific complications. Consent was taken from 30 patients (23.7%) within 6 hours from the surgery and within 6 hours to 24 hours in 73 (57.5%) cases, before 24 hours in 24 (18.9%)

cases. From 56 patients (44.1%) consent was taken by an intern doctor, 10 (7.9%) by a nurse, 38 (30%) by a medical officer and 23 (18.1%) by a post-graduate trainee. A total of 101 patients (79.5%) did not know the identity of the consent taking person. In 98 cases (77.2%) the mother language is used, 23 (22.8%) 2nd language is used. Time was not given for clarifications in 112 cases (88.2%). Elective surgeries are standard procedures with known complications. Authors suggest giving adequate time before the surgery and chance for clarifications. Identity of the health care personnel is important to build trust on credibility of information. Authors suggest implicating a check list, not to neglect components. Awareness of the components and the significance of the consent taking should be emphasized at institutional, local and national level.

**Keywords:** Informed written consent, Surgery