

Inform consent in Urology: For who, why, how ?

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Introduction:

- Quality of Care group
- First idea: Inform consent
 - for patient, for urologist
 - Approved by:
 - Urologist
 - BAU
 - Academic
 - GBS-VBS
 - Patient's associations

Introduction: QOC task force

- Ameye Filip
- Bollens Renaud
- Busard Philippe
- Chatzopoulos Charles
- Dardenne Emmanuel
- De Troyer Bart
- Dewallens Filip
- Goeman Lieven
- Hoffmann Paul
- Joniau Steven
- Lufuma Emmanuel
- Lumen Nicolas
- Quackels Thierry

For who ?:

- Patients:
 - Need good information
- Urologist:
 - Medico-legal protection
 - Standardisation

Why ?

Dewallens Filip (Dewallens and partners)

- Lawyer (Dewallens and partner)
- Voorzitter van de Vlaamse Vereniging voor Gezondheidsrecht VZW
- Voorzitter van het European Health Managers Forum – Belgium VZW
- Gastprofessor gezondheidsrecht EHSAL te Brussel
- Gastdocent faculteit Geneeskunde K.U. Leuven
- Deeltijds navorser Rechtsfaculteit K.U. Leuven
- Redactielid van het Tijdschrift voor Gezondheidsrecht / Revue de Droit de la Santé
- Redactielid van de reeks monografiën “Recht en Gezondheidszorg”
- International Associate Member of the American Bar Association (Health Law Section)
- Bestuurder van het Studiecentrum voor Gezondheidsrecht VZW
- Lid van de Raad van Bestuur van de Alumni Ziekenhuiswetenschappen VZW
- Lid van de Brussels Pharma Law Group

Quality of I.C.:

- Understood by patient:
 - Dutch version
 - French version
 - German version ??



Quality of I.C.

- Major risks



Quality of I.C.

- Not to scary for patient



Quality of I.C.

- Most frequents complications



Quality of I.C.

Honest:

% based on published data



Quality of I.C.

- Realistic:
 - Lack of %
 - %: « acceptable »



General structure of I.C.

- Title: Procedure (version)
- Anatomy and principles of surgery
- Other therapeutics
- Preoperative exam
- Surgical technic

General structure of I.C.

- Usual events: *
 - During hospitalisation
 - At Home
- Complications: *
 - During surgery and hospitalisation
 - Delayed

*Ranges:

- Exceptional : <1%
- Rare: 1-5 %
- Occasional: 5-15 %
- Frequent: > 15 %

Structure of I.C.

- Inform consent:
 - Two exemplars
 - Underline major facts
 - Open box for patient's specificities
 - Must be signed

Practically

- Warning mail to urologists:
 - New (or new version) I.C. available
 - Web site: QOCurology.be
 - 4 weeks for comments and improvement
 - After 4 weeks: Definitive version usable

I.C. ready to use:

- TOT
- Radical prostatectomy
- Vasectomy
- Circumcision
- Cystectomy
- TURB
- Partial Nephrectomy

I.C. almost ready:

- Ureteroscopy
- Prostate Biopsies
- TURP

Challenges

- New I.C.
- Refresh the I.C.



Vu sur Funimages.free.fr

New I.C. for 2012:

- Nephrectomy
- Prolaps (Working group female urology)
- Prostate adenomectomy
- Percutaneous nephrolithotripsy
- ...



Conclusions:

- I.C. gives the best information for patient
- I.C. protect you
- I.C. will be not put in doubt.

- But if you don't use ... you will be guilty...