

Useful Contacts

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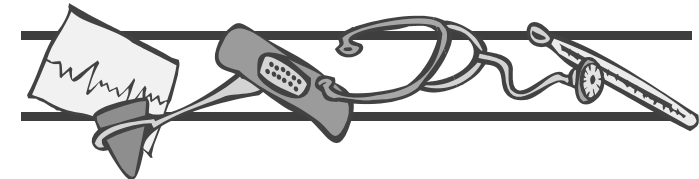
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A BRIEF GUIDE TO CONSENT POLICY



HOW DO I GIVE CONSENT?

WHAT PROCEDURES REQUIRE SIGNED CONSENT?

PRODUCED FOR THE PATIENTS AND VISITORS
OF SOUTH HOLDERNESS MEDICAL PRACTICE.

This practice adheres to a consent policy which means that before you undergo any treatment, investigation or immunisation you must fully understand and consent to it happening. Before consent you must make sure you completely understand the nature, purpose and risks involved, the doctor or health care provider must ensure you fully understand, and have enough information to give 'Informed Consent', which may be either "implied" or "expressed".

Implied Consent

Implied consent will be assumed for many routine physical contacts with patients. Where implied consent is to be assumed by the clinician, in all cases, the following will apply:

- An explanation will be given to the patient what he / she is about to do, and why.
- The explanation will be sufficient for the patient to understand the procedure.
- In all cases where the patient is under 18 years of age a verbal confirmation of consent will be obtained and briefly entered into the medical record.
- Where there is a significant risk to the patient an "Expressed Consent" will be obtained in all cases

Expressed Consent

Expressed consent (written or verbal) will be obtained for any procedure which carries a risk that the patient is likely to consider as being substantial. A note will be made in the medical record detailing the discussion about the consent and the risks. A Consent Form may be used for the patient to express consent (see below).

Obtaining Consent

- Consent (Implied or Expressed) will be obtained prior to the procedure, and prior to any form of sedation.
- The clinician will ensure that the patient is competent to provide a consent (16 years or over)
- Consent will include the provision of all information relevant to the treatment.
- Questions posed by the patient will be answered honestly, and information necessary for the informed decision will not be withheld unless there is a specific reason to withhold.
- The person who obtains the consent will be the person who carries out the procedure
- The person obtaining consent will be fully qualified and will be knowledgeable about the procedure and the associated risks.
- The scope of the authority provided by the patient will not be exceeded unless in an emergency.
- The practice acknowledges the right of the patient to refuse consent, delay the consent, seek further information, limit the consent, or ask for a chaperone.

- Clinicians will use a Consent Form where procedures carry a degree of risk or where, for other reasons, they consider it appropriate to do so (e.g. malicious patients).
- No alterations will be made to a Consent Form once it has been signed by a patient.
- Clinicians will ensure that consents are freely given and not under duress (e.g. under pressure from other present family members etc.).
- If a patient is mentally competent to give consent but is physically unable to sign the Consent Form [*], the clinician should complete the Form as usual, and ask an independent witness to confirm that the patient has given consent orally or non-verbally.

Consent for Children

Everyone 16 or more is presumed to be competent to give consent for themselves, unless the opposite is demonstrated. If a child under the age of 16 has sufficient understanding and intelligence to enable them to understand fully what is proposed then they will be deemed competent to consent for themselves. (This is known as Gillick competence)

Therefore young people aged 16 and 17 and legally competent younger children may therefore sign a consent form for themselves but may like a parent to countersign as well.