

This information booklet has been
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Manchester Learning Disability Partnership

and

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NHS Foundation Trust

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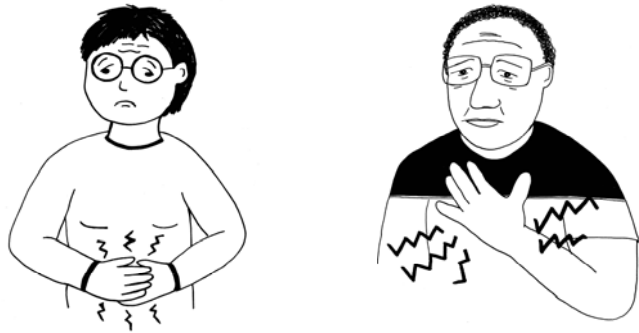
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Having an operation

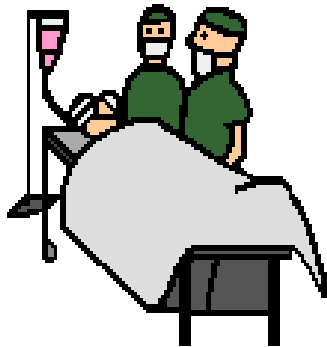


Sometimes you have to go into hospital when you are poorly.



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You are having an operation at Wythenshawe Hospital.

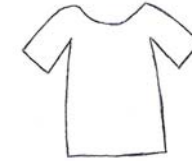


This booklet gives you some information about Wythenshawe hospital.

Look through this booklet with your helper or carer.

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You will go to your ward, get undressed and put on your gown.



Gown that fastens at the back.

You can get into bed, or sit on a chair.

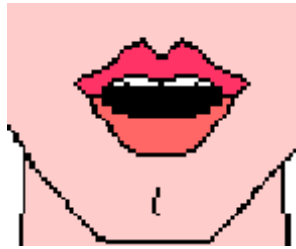


Your nurse will meet you when you are settled on the ward.
The nurse will make sure you are okay.

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The nurse will want to check your blood pressure and temperature.



thermometer

The thermometer is put in your mouth for a few minutes.

You will not be able to have anything to eat or drink.



No
X



No
X

Blank page for you to make notes

Before your operation your doctor may examine you again.



The doctor will talk to you and your helper about your operation.



The doctor will tell you about:

- the operation they want to do.
- why the operation will make you feel better.
- how you will feel after the operation.
- things that could go wrong.
- what will happen if you do not have the operation.

Remember - You can ask questions

You will be asked to say **'Yes'** to the operation. This is called 'giving your consent'.

It is your right to say **'Yes'**, or **'No'** to the operation.

Other people can help you think about giving your consent.

Here are some of the people you can talk to:

The doctors

The nurses

Your staff

Your family

Your friends

Your community nurse

Other people who have had the same operation.

If you say **'yes'**, you will sign a consent form. (Form 1).

If you have been a day patient, you can usually go home after you have had a wee.



bedpan

The nurse may bring you a bedpan.

The nurses will also want you to have had something to eat and drink.



Yes



Yes



If you are not well, you may have to stay in hospital for a few days so the doctors and nurses can look after you.

This is Form 1



The Doctor will come and see you when you are awake.
He will ask you how you are feeling.
He will tell you what happened in the operation.
You need to tell him if you are in pain.
He will tell you what is going to happen next.

Department of Health South Manchester University Hospitals **NHS** NHS Trust

Patient agreement to investigation or treatment

CONSENT FORM 1

Responsible health professional _____
Job title _____

Name of proposed procedure or course of treatment (include brief explanation if medical term not clear) _____

Statement of health professional (to be filled in by health professional with appropriate knowledge of proposed procedure, as specified in consent policy)
I have explained the procedure to the patient. In particular, I have explained:
The intended benefits _____

Serious or frequently occurring risks _____

Any extra procedures which may become necessary during the procedure
 blood transfusion other procedure (please specify) _____

I have also discussed what the procedure is likely to involve, the benefits and risks of any available alternative treatments (including no treatment) and any particular concerns of this patient.
 The following leaflet/tape has been provided _____

This procedure will involve:
 general and/or regional anaesthesia local anaesthesia sedation

Signed _____ Date _____
Name (PRINT) _____ Job title _____



Contact Details (if patient wishes to discuss options later) _____
Statement of interpreter (where appropriate)
I have interpreted the information above to the patient to the best of my ability and in a way in which I believe s/he can understand.
Signed _____ Date _____
Name (PRINT) _____

Top copy accepted by patient: yes / no (please ring) _____ Patients notes _____

Sometimes the doctors will have to decide what is the best way to make you feel better.

If you are having trouble understanding about your operation, the doctor will sign another form after talking to you and your helper. (Form 4)

This is Form 4


 South Manchester University Hospitals  NHS Trust

Form for adults who are unable to consent to investigation or treatment
CONSENT FORM 4

Responsible health professional _____
 Job title _____

Patient details (to be pre-printed label)
 Patient's surname/family name _____
 Patient's full name _____
 Date of birth _____
 Next of kin (if other than doctor) _____
 Other None

Special requirements (eg other language/other communication method) _____

All sections to be completed by health professional proposing the procedure
A Details of procedure or course of treatment proposed

(NB see guidance to health professionals overleaf for details of situations where court approval must first be sought)

B Assessment of patient's capacity
 I confirm that the patient lacks capacity to give or withhold consent to this procedure or course of treatment because:

the patient is unable to comprehend and retain information material to the decision; and/or
 the patient is unable to use and weigh this information in the decision making process; or
 the patient is unconscious

Further details (including where patient unconscious): for example how above judgments reached, which colleagues consulted, what attempts made to assist the patient make his or her own decision and why those were not successful.

C Assessment of patient's best interests
 To the best of my knowledge, the patient has not refused this procedure in a valid advance directive. Where possible and appropriate, I have consulted with colleagues and those close to the patient, and I believe the procedure to be in the patient's best interests because:

(Where incapacity is likely to be temporary, for example if patient unconscious, or where patient has fluctuating capacity)
 The treatment cannot wait until the patient recovers capacity because:

To be retained in patient's notes

D Involvement of the patient's family and others close to the patient
The final responsibility for determining whether a procedure is in an incapacitated patient's best interests lies with the health professional performing the procedure. However, it is good practice to consult with those close to the patient (eg spouse/partner, family and friends, carer, supporter or advocate) unless you have good reason to believe that the patient would not have wished particular individuals to be consulted, or unless the urgency of their situation prevents this. "Best interests" go far wider than "best medical interests", and include factors such as the patient's wishes and beliefs when competent, their current wishes, their general well-being and their spiritual and religious welfare.
(to be signed by a person or persons close to the patient, if they wish)
 I/We have been involved in a discussion with the relevant health professionals over the treatment of _____ (patient's name). I/We understand that he/she is unable to give his/her own consent, based on the criteria set out in this form. I/We also understand that treatment can lawfully be provided if it is in his/her best interests to receive it.
 Any other comments (including any concerns about decision)

Name _____ Relationship to patient _____
 Address (if not the same as patient)

 Signature _____ Date _____

If a person close to the patient was not available in person, has this matter been discussed in any other way (eg over the telephone?)
 Yes No

Details:

Signature of health professional proposing treatment
The above procedure is, in my clinical judgement, in the best interests of the patient, who lacks capacity to consent for himself or herself. Where possible and appropriate I have discussed the patient's condition with those close to him or her, and taken their knowledge of the patient's views and beliefs into account in determining his or her best interests.
 I have/have not sought a second opinion.

Signature _____ Date _____
 Name (PRINT) _____ Job title _____

Where second opinion sought, who should sign below to confirm agreement:
 Signature _____ Date _____
 Name (PRINT) _____ Job title _____



You will feel very sleepy and may feel sick.

The nurse will look after you.

You will go back to your ward on a trolley.



When your operation is over, you will wake up in the 'Recovery Room'.

When you wake up you will be wearing a mask. This is to help you breathe.

The nurse will check your breathing and blood pressure.

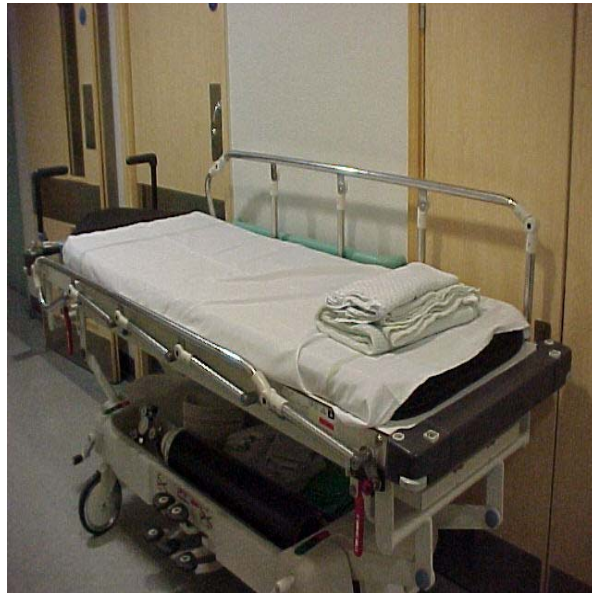
This is an Anaesthetist.

Her job is to put you to sleep while the doctor does your operation.

She will look after you and make sure you keep breathing during your operation.

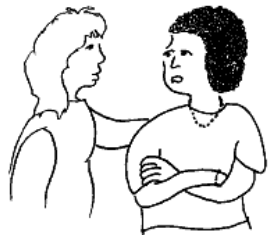


The anaesthetist will come to see you before your operation. He or she will check you are well enough to have the medicine to put you to sleep.



When its time for your operation the porter will take you to the operating theatre on a trolley.

Your helper can go with you.



Your 'helper' could be a friend, staff, family, or a health worker.



The anaesthetist will give you a jab in your arm to help you relax. This is called a 'pre-med'.

He will ask you to count. He will put a mask on your face, it will go over your nose and mouth. A smell will come out.

This is called a general anaesthetic and will make you go to sleep.