

Survey suggests that informed consent process important to surgery patients in teaching hospital

September 19 2011

A survey of patients receiving treatment in a teaching facility found that patients prefer to be informed of trainee participation in their care, and consent rates appear to vary based on scenarios describing increased levels of resident participation, according to a report published Online First by *Archives of Surgery*.

According to background in the article, the concept of surgeon-patient interaction prior to surgery can be traced back as far as [ancient Greece](#); however, the formal system of [informed consent](#) is more modern.

"Currently, no widely accepted guidelines or policies exist for providing information regarding the role of surgical trainees to the patient during the informed consent process," the authors write. "The accepted standard is to provide information that 'a reasonable patient' would want and would need to know to make an informed decision, but this counseling may vary widely by health care professional, setting, and type of surgical procedure."

Christopher R. Porta, M.D., and colleagues from Madigan Army [Health System](#), Tacoma, Wash., conducted an anonymous questionnaire at a tertiary-level U.S. Army hospital and referral center, to evaluate patient perceptions and willingness to participate in surgical resident education and training programs.

The authors distributed 500 surveys, 316 (63.2 percent) of which were

returned and included in the study. Most [patients](#) indicated no preference for a private hospital versus a teaching hospital, however of those who did, more preferred a teaching hospital to a private facility for overall care (24.9 percent vs. 8.8 percent) and minor surgical procedures (28.2 percent vs. 12 percent), but hospital preference for major surgical procedures was similar (24.7 percent vs. 26.6 percent). Additionally, 91.2 percent of those patients who indicated a facility preference reported that their care in a [teaching hospital](#) would be equivalent to or better than that of a private hospital.

Patients also indicated they overwhelmingly preferred to be informed of resident participation in their surgical procedure, regardless of whether it was a major procedure (95.7 percent) or a minor surgery (87.5 percent). A total of 94 percent of respondents indicated they would consent to involvement of a surgical resident, however this decreased to 85 percent for a surgical intern and 79.9 percent for medical student involvement. When provided with specific scenarios involving trainee participation, 57.6 percent of patients consented to having a junior resident act as the first assistant, 25.6 percent consented to the resident acting as the operation surgeon with direct staff observation, and 18.2 percent consented to resident participation without direct staff observation.

The authors conclude that their findings show, "patients routinely would prefer to be informed regarding details of trainee participation in their care, and that this information would significantly affect their willingness to consent." However, they also note, "Although most patients express an overall willingness to participate in surgical education, wide variations can be observed in the actual consent rates for specific training situations. This decreased willingness to consent and the potential effect on training programs must be considered when discussing policy initiatives aimed at improving informed consent."

More information: *Arch Surg*. Published online September 19, 2011.

[doi:10.1001/archsurg.2011.235](https://doi.org/10.1001/archsurg.2011.235)

Provided by JAMA and Archives Journals

Citation: Survey suggests that informed consent process important to surgery patients in teaching hospital (2011, September 19) retrieved 25 April 2024 from

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