



CLINIC

Internal Medicine

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Name: _____ First name: _____ DOB. Date: _____

Declaration of Informed Consent for Bronchoscopy

Planned procedure (no specialist terminology): Bronchoscopy (examination of the lungs) using a flexible tube. This is preceded by an infusion (small cannula inserted into a vein on your forearm).

Alternative treatments: None

Reason for procedure (consequences of omission, urgency):
Detection of respiratory (airway) or lung disease

Procedure: (objective and subjective description, poss. including a sketch)

Acc. to personal discussion with the help of sketch/Atlas:
Local anaesthetic of nose and throat with lidocaine (liquid). Intravenous injection of Dormicum (sleep-inducing drug). Supply of oxygen via the nose. Monitoring of pulse and oxygen saturation level in the blood with a finger clip. Insertion of instrument (generally via the nose), followed by performance of bronchoscopy.

Complications (if possible, indicating percentages):

- | | |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Bleeding | < 1% |
| <input type="checkbox"/> Infection | < 1% |
| <input type="checkbox"/> Injury | < 5% (in particular "collapsed lung") |
| <input type="checkbox"/> Other | < 1% irregular pulse |

These complications (bleeding and collapsed lung) generally only occur when samples of tissue are taken from the lungs.

Risk factors for patient:

- Age
- Medication (anticoagulation, thrombocyte aggregation inhibitors, immunosuppressants)
- Diabetes
- Heart conditions
- Lung conditions
- Other



After the procedure:

- | | |
|---|--|
| <input type="checkbox"/> Pain | |
| <input type="checkbox"/> Bed rest | for around 2-3 hours |
| <input type="checkbox"/> Monitoring | for around 2-3 hours |
| <input type="checkbox"/> Ability to work | not possible throughout the day of the procedure |
| <input type="checkbox"/> Ability to drive | not possible throughout the day of the procedure |
| <input type="checkbox"/> Miscellaneous | |

Aids used:

- Pictures/photos
- Textbook
- Model
- Information sheet

Special remarks (e.g. patient refuses information or procedure):

If a collapsed lung occurs, a drainage tube will have to be inserted through the chest wall (local anaesthetic, flexible tube connected to suction apparatus, for around 3 days). With life-threatening bleeding possibly intubation and machine ventilation.

Declaration of consent

I have been informed in detail about the necessity, events and possible complications of the above procedure by Dr. _____.

I was able to ask questions and consent to performance of the procedure.

Place and date

Patient's signature

Doctor's signature