

02-Practical 2023/2024

Informed Consent - Cases

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Case 1

10-year-old boy accidentally runs through a glass window at school and lacerates the radial artery. His teacher brings him to the emergency department. The boy is bleeding and needs both a blood transfusion and surgery to correct the defect. What should you do?

Case 2

16-year-old girl comes to see you in clinic to discuss contraception. She is generally healthy but is not accompanied by a parent. What should you do?

Case 3

16-year-old girl comes to see you in her first trimester of pregnancy. She is seeking an abortion. What should you do?

Case 4

You inform a patient about the risks and benefits of bone marrow transplantation for chronic myelogenous leukemia. You fully inform the patient about the risk of transplantation, including the possibility of developing graft versus host disease. After the transplantation the patient develops graft versus host disease, which is hard to control. The patient learns that there is an alternative treatment called imatinib (gleevec) which you did not tell them about. Gleevec does not include the risk of graft versus host disease, but will not cure the leukemia. The patient files suit against you. What will be the most likely outcome of the suit?

Case 5

A man undergoes coronary angioplasty. He is informed that the artery may rupture and that there is a small chance he could bleed to death during the surgery to repair the damaged vessel. He knows he could have bypass surgery instead. He understands and chooses the angioplasty. He dies from a ruptured blood vessel. The family files suit against you. What will be the most likely outcome?

Case 6

A 40-year-old man is undergoing a nasal polypectomy. In the operating room you see a lesion on the nasal turbinate that the frozen section determines to be a cancer. You have found the cancer early but will need to resect the nasal turbinate to cure it. What should you do?

Case 7

64-year-old woman accompanied by her husband comes to the emergency room seeking treatment for chest pain. The patient clearly tells you that she wants to have her aorta repaired and she signs consent for the procedure. She later becomes hypotensive and loses consciousness. Her husband is now the decision maker and says, "Let her die." What do you tell him?

Case 8

You are an intern who has consulted surgery to place a subclavian central venous line. You only know access must be obtained. You do not know why the internal jugular approach is not being used. On the phone the surgical resident says, "Can you go get the consent while I am coming up?" What should you do?

Case 9

A 64-year-old woman with MS is hospitalized. The team feels she may need to be placed on a feeding tube soon to assure adequate nourishment. They ask the patient about this in the morning and she agrees. However, in the evening (before the tube has been placed), the patient becomes disoriented and seems confused about her decision to have the feeding tube placed. She tells the team she doesn't want it in. They revisit the question in the morning, when the patient is again lucid. Unable to recall her state of mind from the previous evening, the patient again agrees to the procedure.

Is this patient competent to decide? Which preference should be honored?

Case 10

A 55-year-old man has a 3-month history of chest pain and fainting spells. You feel his symptoms merit cardiac catheterization. You explain the risks and potential benefits to him, and include your assessment of his likely prognosis without the intervention. He is able to demonstrate that he understands all of this, but refuses the intervention.

Can he do that, legally? Should you leave it at that?

Case 11

You are the attending physician at a chronic care facility. One of the residents, Mr. T, an 84-year-old war veteran with no living relatives, unable to look after himself owing to physical frailty and mild cognitive decline, develops gangrene in his foot due to poor circulation; it does not respond to medical treatment. Advised to have the foot amputated, Mr. T refuses, saying, “My foot will get better on its own. I’ve seen lots worse during the war!”

Case 12

Ms. X., a 60-year-old woman with early-stage breast cancer, accompanied by her 25-year-old daughter, has come to see Dr. Y for a second opinion. The breast surgeon explains, as far as surgery goes, fortunately all she needs is breast-conserving surgery (BCS). Ms. X does not look relieved. With her daughter translating, she replies, “That’s what the other doctor said, too. But that’s not what I want!” Her daughter explains she wants a modified radical mastectomy, having no confidence in the first type of operation as one of her friends had a recurrence of breast cancer after it. Dr Y. is a little confused. She usually finds herself in the opposite position of trying to convince some women to have any surgery at all. Although Dr. Y describes the morbidity associated with radical surgery, Ms. X remains unconvinced. Her daughter explains this view of BCS is common in their culture.