



DR FRANCOIS SWART
NEUROSURGEON

INFORMED CONSENT DOCUMENT

CARPAL TUNNEL RELEASE

INTRODUCTION

This is an informed-consent document which has been prepared to help your surgeon inform you about Carpal Tunnel release surgery, its risks and alternative treatment.

Carpal Tunnel syndrome occurs when the median nerve is compressed within the Carpal Tunnel region of the wrist. There are many causes of carpal tunnel syndrome. Depending on the extent, severity and degree of nerve compression, this disorder may not improve without surgery. Surgery is performed to relieve symptoms associated with median nerve compression and to prevent the loss of hand function. Hand rehabilitation after surgery may be necessary.

ALTERNATIVE TREATMENT

Alternative forms of treatment consist of not treating the condition, wearing wrist splints, medications, vitamin supplements, or having injections of cortisone-type drugs into the carpal tunnel region. Treatment of certain types of systemic diseases or other conditions if present may improve carpal tunnel syndrome. Risks and potential complications are associated with alternative forms of treatment.

ANAESTHETIC:

You will be receiving a combination of general and local anaesthetics.

A general anaesthetic is a mixture of drugs to keep you unconscious and pain free during an operation. During the operation different drugs will be given at particular times for a specific purpose. Drugs are injected into the bloodstream via a vein or breathed in as gases or vapours into the lungs. A breathing tube may be put into your throat or windpipe to help you breathe under the anaesthetic. The tube is removed as you wake up after the procedure.

Local anaesthetics include spinal and epidural injections. This is the injection of local anaesthetic drugs, sometimes a pain killer, into the back to numb a large part of the body. These techniques are used to relieve pain during the operation and sometimes for pain relief afterwards.



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Local anaesthetics can also be used to numb small areas, such as the site of the operation, or as nerve blocks to numb a larger area. Local anaesthetics may be combined with general anaesthetic.

RISKS FROM THE ANAESTHETIC:

Modern anaesthesia is generally safe. However, risks do exist. Whilst these events are usually temporary, some of them may cause long term problems.

Common side-effects:

- nausea and vomiting
- headache
- Pain and/or bruising at injection sites
- Sore or dry throat and lips
- blurred or double vision

Less common side- effects:

- muscle aches
- weakness
- mild allergic reactions

Uncommon side- effects:

1. awareness under general anaesthetic
2. damage to teeth, dental prosthetics, and lips
3. damage to the voice box and vocal cords, which may cause temporary hoarseness
4. blood clot in the leg
5. damage to nerves at pressure areas
6. seizures

Rare risks which may cause death:

- severe allergy or shock
- very high temperature
- stroke or heart attack
- vomit in the lungs
- paralysis
- blood clot in the lungs
- brain injury

Increased risk:

- a bad cold or flu, asthma or other chest disease
- smoking



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- being overweight
- diabetes
- heart disease
- kidney disease
- high blood pressure
- other serious medical conditions

Risks of local anaesthetics:

- Nerve damage, due to bleeding, infection or other causes, is an additional specific risk with local anaesthesia. This may cause weakness and/or numbness of the body part that the nerve goes to. This is usually mild and temporary

PATIENT'S RESPONSIBILITY BEFORE SURGERY:

- Increase your fitness
- Give up smoking at least 6 weeks before surgery. Inform the anaesthetist if you smoke
- Bring all prescribed drugs and herbal drugs to the hospital on admittance and inform your doctor about them
- Report all allergies.
- Do not drink any alcohol 24 hours prior to the procedure
- Ask your doctor if you should stop taking aspirin before the procedure. Report the use of any blood thinning medication to doctor timely before the procedure
- Inform the doctors if you are on the contraceptive pill or IF YOU MAY BE PREGNANT

THINGS TO AVOID AFTER GENERAL ANAESTHESIA:

A General anaesthetic will affect your judgement for about 24 hours. This is also applicable to conscious sedation (light anaesthetic).

AVOID:

- Driving any type of vehicle
- Operating machinery, including cooking implements
- Signing any legal documents
- Take any mind-altering drugs, including alcohol

GENERAL RISKS OF A PROCEDURE:

1. Small areas of the lungs may collapse, increasing the risk of chest infection. This may need physiotherapy and antibiotics



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2. Clots in the legs (deep venous thrombosis) with pain and swelling. Rarely part of this clot may dislodge and go to the lungs which can be fatal
3. A heart attack because of strain on the heart
4. Stroke
5. Death is unlikely but possible due to the procedure

RISKS OF CARPAL TUNNEL RELEASE SURGERY

Every surgical procedure involves a certain amount of risk and it is important that you understand the risks involved with carpal tunnel surgery. An individual's choice to undergo a surgical procedure is based on the comparison of the risk to potential benefit. Although the majority of patients do not experience these complications, you should discuss each of them with your plastic surgeon to make sure you understand the risks, potential complications and consequences of Carpal Tunnel surgery.

- **Bleeding** - It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood or blood transfusion. Non-prescription "herbs" and dietary supplements can increase the risk of surgical bleeding.
- **Infection** – An infection is rare after surgery. Should an infection occur, treatment including antibiotics or additional surgery may be necessary.
- **Scarring** – Although good wound healing after a surgical procedure is expected, abnormal scars may occur both within the skin and deeper inside the wrist. Scars may be unattractive and of different color than surrounding skin. Scars may limit motion and function. There is the possibility that scarring can contribute to the recurrence of Carpal Tunnel syndrome. Additional treatments including surgery may be needed to deal with scarring.
- **Delayed Healing** – Depending on the type of Carpal Tunnel surgery performed, there may be a prolonged time until swelling and soreness improve following surgery.
- **Damage to associated structures** – Structures such as nerves, blood vessels and muscles may be damaged during the course of surgery. Damage to the median nerve may produce permanent finger numbness or loss of thumb strength. Injury to nerves may produce painful growths known as neuromas in both the skin and deeper tissues. The potential for this to occur varies with the type of surgical technique utilised. Additional surgery may be necessary should this problem occur.



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- **Non-improvement** – Carpal Tunnel symptoms of hand numbness may not be improved after surgery. There also may not be improved in thumb muscles damaged from carpal tunnel syndrome. Other disorders of the upper extremity and neck, which may be in coexistence with Carpal Tunnel syndrome, will not be improved from a carpal tunnel release surgery. There are other conditions of median nerve compression in the forearm which simulate Carpal Tunnel symptoms. Disease conditions and systemic illnesses may cause the direct injury to nerves. Nerve function may not return to normal even after a successful Carpal Tunnel release. These are the possibility of a poor result from the carpal tunnel surgery. This would include risks such as loss of function, wound disruption, chronic pain, and loss of hand function.
- **Unknown outcome of surgery** – There is the possibility that hand function after Carpal Tunnel surgery may not be adequate for return to your regular occupation.
- **Allergic reaction** – In rare cases, local allergies to tape, suture material, or topical preparations have been reported. Systemic reactions which are more serious may occur to drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.
- **Recurrence of Carpal Tunnel syndrome** – Carpal Tunnel syndrome may recur after surgery due to a variety of reasons. It may not be possible to completely release the median nerve compression with surgery. Scarring and inflammatory disorders of the wrist tendons may produce constriction of the median nerve and recurrence of symptoms. Disorders of the neck, upper extremity, or systemic illness may contribute to the perpetuation of Carpal Tunnel symptoms after surgery. Additional treatment may be necessary if there is a recurrence of Carpal Tunnel syndrome recur.

ADDITIONAL SURGERY NECESSARY

Should complication occur, additional surgery or other treatments may be necessary. Even though risks and complications occur infrequently, the risks cited are the ones that are particularly associated with Carpal Tunnel surgery. Other complications and risks can occur but are even more uncommon. The practice of medicine and surgery is not an exact science. Although good results are expected, there is no guarantee or warranty expressed or implied on the results that may be obtained.

DISCLAIMER

Informed consent documents are used to communicate information about the proposed surgical treatment of a disease or condition along with disclosure of risks and alternative forms of treatment(s). The informed consent process attempts to define principles of risk disclosure that should generally meet the needs of most patients in most circumstances.



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However, informed consent documents should not be considered all inclusive in defining other methods of care and risks encountered. Your surgeon may provide you with additional or different information which is based on all the facts in your particular case and the state of medical knowledge.

Informed consent documents are not intended to define or serve as the standard of medical care. Standards of medical care are determined on the basis of all the facts involved in an individual case and are subject to change as scientific knowledge and technology advance and as practice patterns evolve.

It is important that you read the above information carefully and have all of your questions answered before signing the consent.

CONSENT FOR SURGERY/PROCEDURE or TREATMENT:

6. I hereby authorise Dr. Francois Swart and such assistants as may be selected to perform the following procedure or treatment.
7. I recognise that during the course of the operation and medical treatment or anesthesia, unforeseen conditions may necessitate different procedures than those above. I therefore authorise the above physician and assistants or designees to perform such other procedures that are in the exercise of his or her professional judgement necessary and desirable. The authority granted under this paragraph shall include all conditions that require treatment and are not known to my physician at the time the procedure is begun.
8. I consent to the administration of such anesthetics considered necessary or advisable. I understand that all forms of anesthesia involves risk and the possibility of complications, injury and sometimes death.
9. I acknowledge that no guarantee has been given by anyone as to the results that may be obtained.
10. I consent to the photographing or televising of the operation(s) or procedure(s) to be performed, including appropriate portions of my body, for medical scientific or educational purposes, provided my identity is not revealed by the pictures.
11. For purposes of advancing medical education, I consent to the admittance of observers to the operating room.
12. I consent to the disposal of any tissue, medical devices or body parts which may be removed.



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13. THE FOLLOWING HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
- The above treatment or procedure to be undertaken
 - There may be alternative procedures or methods of treatment
 - There are risks to the procedure or treatment proposed

I CONSENT TO THE TREATMENT OR PROCEDURE AND THE ABOVE LISTED ITEMS (1-8). I AM SATISFIED WITH THE EXPLANATION.

Based on the above statements, I request to have the procedure.

Name of patient or parent / guardian if minor:

Signature:

Date: