



DR FRANCOIS SWART  
NEUROSURGEON

## INFORMED CONSENT DOCUMENT SPINE SURGERY

### 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, sometimes for pain relief afterwards.

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. The risk of a healthy person dying unexpectedly during anaesthesia is less than the risk of dying in a car accident. However, risks do exist. Whilst these events are usually temporary, some of them may cause long term problems.

#### Common unwanted 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 unwanted effects:

- muscle aches
- weakness
- mild allergic reactions

#### Uncommon effects:

- awareness under general anaesthetic



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- damage to teeth, dental prosthetics and lips
- damage to the voice box and vocal chords which may cause temporary hoarseness
- blood clot in the leg
- damage to nerves at pressure areas
- 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 risks:**

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

**Additional specific risks of spinal and epidural anaesthesia are:**

- Rarely, nerve damage, which may be severe and permanent. This may cause paralysis of the lower half of the body or all of the body (quadriplegia)
- Rarely, damage to surrounding structures (blood vessels, lungs)
- Headache. Usually temporary, but may be severe and can last many days
- Backache. This is usually temporary due to bruising around the injection site. On occasions this can be long term



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**PATIENT'S RESPONSIBILITY BEFORE SURGERY:**

Increase your fitness. Give up smoking at least 6 weeks before surgery. Inform anaesthetist if you smoke. Bring all prescribed drugs and herbal drugs and tell 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. 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).

**You must not:**

- Drive any type of vehicle
- Operate machinery including cooking implements
- Sign any legal documents
- Take any mind-altering drugs, including alcohol

**GENERAL RISKS OF A PROCEDURE:**

**INCLUDE:**

- Small areas of the lungs may collapse, increasing the risk of chest infection. This may need physiotherapy and antibiotics
- Clots in the legs (deep venous thrombosis) with pain and swelling. Rarely, part of this clot may dislodge and move to the lungs, which can be fatal
- A heart attack because of strain on the heart
- A stroke
- Death is unlikely, but possible due to this procedure

**SPECIFIC RISKS OF THIS PROCEDURE:**

- Nerve root injury that causes weakness, this may be temporary or permanent
- Injury to the nerve covering (dura) with leakage of cerebrospinal fluid that can cause meningitis and poor wound healing. This may need treatment with antibiotics and further surgery
- Further disc prolapses at the same level or other levels of the spine, this will cause pain and may need further surgery
- Paralysis of the lower part of the body that may be temporary or permanent and may require further surgery
- Infection in the wound causing redness, pain and possible discharge or abscess. This may need antibiotics and further surgery
- Possible bleeding into the wound with swelling, bruising and possible blood-stained discharge



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- The wound may not heal normally. The wound can thicken and turn red (keloid scar) and the scar may be painful
- Ongoing persistent back pain and leg pain, with possible leg numbness due to nerve damage
- Increased risk in obese patients of wound infection, chest infection, heart and lung complications, thrombosis
- Increased risk in smokers of wound and chest infections, heart and lung complications and thrombosis
- Pain from the graft site of the hip. This usually settles in time
- The implants may break while the bone is knitting (fusing). This may require further surgery.
- The bone may not knit (fuse). This may cause pain and further surgery
- Disc prosthesis: mobility may be lost, and fusion may occur
- Surgery from the front side: Major blood vessels in the abdomen are close to the surgical area. Injury to these may result in life-threatening blood loss
- Surgery from the front side: Injury may occur to bowel, urinary system or the nerves supplying the genital system (decreased perineal sensation and abnormal ejaculation in males, influencing fertility – 2%)

**I ACKNOWLEDGE THAT:**

The doctor has explained my medical condition and the proposed surgical procedure. I understand the risks of the procedure, including the risks that are specific to me, and the likely outcomes.

I was able to ask questions and raise concerns with the doctor about my condition, the procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.

I understand that the procedure may include a blood transfusion.

Should any unexpected pathology be found during my operation, I agree that the doctor may modify the surgical plan appropriately.

The doctor has explained to me that if immediate life-threatening events happen during the procedure, they will be treated appropriately.

I understand that photographs may be taken during my operation.

I understand that no guarantee has been made that the procedure will improve the condition, and that the procedure may make the condition worse.

I understand that it is common practice to have a representative from the medical devices/



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pharmaceutical industry present during the operation, if deemed appropriate by Dr Swart.

I understand that my medical insurance/funder may not cover the complete cost of the procedure, that I am responsible for payment of the account and I am aware that a quote for the procedure is available on request.

On the basis of the above statements, I request to have the procedure.

**DOCTORS STATEMENT:**

I have explained:

- the patient's condition
- need for treatment
- the procedure and the risks
- relevant treatment options and their risks
- likely consequences if those risks occur
- the significant risks and problems specific to this patient

I have given the patient an opportunity to:

- ask questions about any of the above matters
- raise any concerns

which I have answered as fully as possible.

**Name of patient or parent / guardian if minor:**

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**Signature:**

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**Date:**

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