Queensland Government
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#### Manipulation of Supracondylar Fracture of the Elbow

Facility:

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A. Interpreter / cultural needs		
An Interpreter Service is required?	Yes	N
If Yes, is a qualified Interpreter present?	Yes	N
A Cultural Support Person is required?	Yes	N
If Yes, is a Cultural Support Person present?	Yes	N
B. Condition and treatment		
Di Gonanion and troatmont		

The doctor has explained that you have the following condition: (Doctor to document in patient's own words)

This condition requires the following procedure. (Doctor to document - include site and/or side where relevant to the procedure)

Left elbow	Yes No
Right elbow	Yes No

The following will be performed:

This procedure involves a manipulation of a supracondylar fracture of the elbow under anaesthetic. Wires may be placed to hold the fracture in position and/ or the arm may be placed in traction.

## C. Risks of a manipulation of supracondylar fracture of the elbow

There are risks and complications with this procedure. They include but are not limited to the following.

#### General risks:

- Infection can occur, requiring antibiotics and further treatment.
- Bleeding could occur and may require a return to the operating room. Bleeding is more common if you have been taking blood thinning drugs such as Warfarin, Asprin, Clopidogrel (Plavix or Iscover) or Dipyridamole (Persantin or Asasantin).
- Small areas of the lung can collapse, increasing the risk of chest infection. This may need antibiotics and physiotherapy.
- Increased risk in obese people of wound infection, chest infection, heart and lung complications, and thrombosis.
- Heart attack or stroke could occur due to the strain on the heart.
- Blood clot in the leg (DVT) causing pain and swelling. In rare cases part of the clot may break off and go to the lungs.

Date of birth:

Sex: M F I

Death as a result of this procedure is possible.

(Affix identification label here)

URN:

Family name:

Address:

Given name(s):

Specific risks:

- Loss of position of fracture. This may require further surgery.
- A build up of pressure in the arm called compartment syndrome. This may require further surgery, which usually leaves a wide scar. This may need skin grafting.
- Nerve damage, which may cause weakness or numbness. This may be temporary or permanent.
- The loss of movement of fingers and/or thumb and/or wrist and numbness. This may be temporary or permanent.
- Damage to blood vessels at time of fracture. This may require surgery to repair the blood vessels.
- Loss of ability to fully extend the elbow. This may be permanent.
- Rotating deformity of elbow. This may require further surgery.

D. Significant risks and procedure options
(Doctor to document in space provided. Continue in Medical Record if necessary.)

		PROCEDURA
E. Risks of	not having this proced	dure
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(Doctor to docu	ument in space provided. C d if necessary.)	
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#### F. Anaesthetic

This procedure may require an anaesthetic. (Doctor to document type of anaesthetic discussed)


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## Manipulation of Supracondylar Fracture of the Elbow

Facility:

	(Affix identification labe	i nere)		
URN:				
Family name:				
Given name(s):				
Address:				
Date of birth:		Sex: M	□F	$\Box$ ı

#### G. Patient consent

I acknowledge that the doctor has explained;

- my medical condition and the proposed procedure, including additional treatment if the doctor finds something unexpected. I understand the risks, including the risks that are specific to
- the anaesthetic required for this procedure. I understand the risks, including the risks that are specific to me.
- other relevant procedure/treatment options and their associated risks.
- my prognosis and the risks of not having the procedure.
- that no guarantee has been made that the procedure will improve my condition even though it has been carried out with due professional care.
- the procedure may include a blood transfusion.
- tissues and blood may be removed and could be used for diagnosis or management of my condition, stored and disposed of sensitively by the hospital.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor or my Acute Resuscitation Plan.
- a doctor other than the Consultant may conduct the procedure. I understand this could be a doctor undergoing further training.

I have been given the following Patient Information Sheet/s:

About Your AnaestheticManipulation of Supracondylar Fracture of the Elbow

- I was able to ask questions and raise concerns with the doctor about my condition, the proposed procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time, including after I have signed this form but, preferably following a discussion with my doctor.
- I understand that image/s or video footage may be recorded as part of and during my procedure and that these image/s or video/s will assist the doctor to provide appropriate treatment.

On the basis of the above statements,

### I request to have the procedure

	-	<u>-</u>
I	Name of Pa	tient:
;	Signature:	
I	Date:	
	Patients	s who lack capacity to provide consent
		must be obtained from a substitute decision nthe order below.
	Does the (AHD)?	patient have an Advance Health Directive
	☐ Yes ►	Location of the original or certified copy of the AHD:
ı		
	□ No ►	Name of Substitute Decision Maker/s:
		Signature:
		Relationship to patient:
		Date: PH No:
		Source of decision making authority (tick one):
		☐ Tribunal-appointed Guardian
		Attorney/s for health matters under Enduring Power of Attorney or AHD
		☐ Statutory Health Attorney
		If none of these, the Adult Guardian has provided consent. Ph 1300 QLD OAG (753 624)
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#### H. Doctor/delegate Statement

I have explained to the patient all the above points under the Patient Consent section (G) and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor/delegate:
Designation:
Signature:
Date:

#### I. Interpreter's statement

I have given a sight translation in

(state the patient's language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

guardian/substitute decision-maker by the doctor.
Name of
Interpreter:
Signature:
Date:

# Consent Information - Patient Copy Manipulation of Supracondylar Fracture of the Elbow

further surgery.

## 1. What do I need to know about this procedure?

This procedure involves a manipulation of a supracondylar fracture of the elbow under anaesthetic. Wires may be placed to hold the fracture in position and/ or the arm may be placed in traction.

#### 2. My anaesthetic

This procedure will require an anaesthetic.

See About Your Anaesthetic information sheet for information about the anaesthetic and the risks involved. If you have any concerns, discuss these with your doctor.

If you have not been given an information sheet, please ask for one.

## 3. What are the risks of this specific procedure?

There are risks and complications with this procedure. They include but are not limited to the following.

#### General risks:

- Infection can occur, requiring antibiotics and further treatment.
- Bleeding could occur and may require a return to the operating room. Bleeding is more common if you have been taking blood thinning drugs such as Warfarin, Asprin, Clopidogrel (Plavix or Iscover) or Dipyridamole (Persantin or Asasantin).
- Small areas of the lung can collapse, increasing the risk of chest infection. This may need antibiotics and physiotherapy.
- Increased risk in obese people of wound infection, chest infection, heart and lung complications, and thrombosis.
- Heart attack or stroke could occur due to the strain on the heart.
- Blood clot in the leg (DVT) causing pain and swelling. In rare cases part of the clot may break off and go to the lungs.
- Death as a result of this procedure is possible.

#### Specific risks:

- Loss of position of fracture. This may require further surgery.
- A build up of pressure in the arm called compartment syndrome. This may require further surgery, which usually leaves a wide scar. This may need skin grafting.
- Nerve damage, which may cause weakness or numbness. This may be temporary or permanent.
- The loss of movement of fingers and/or thumb and/or wrist and numbness. This may be temporary or permanent.
- Damage to blood vessels at time of fracture. This may require surgery to repair the blood vessels.
- Loss of ability to fully extend the elbow. This may be permanent.


Rotating deformity of elbow. This may require