

The need for improved training of surgeons in documentation of informed consent

Sir,

Informed consent is an ethical concept, codified in law and daily practice (Cocanour, 2017). Legal requirements for essential disclosure and accompanying documentation exist, and the National Institute for Health Research (2021) published a checklist to support the consent process.

A total of 22 consent forms and associated documents for non-elective procedures completed by plastic surgery clinicians at the authors' institution were analysed and compared to the National Institute for Health Research checklist. No clinician was fully compliant. The main areas of concern reflected the use of medical jargon and abbreviations on consent forms and failing to provide a patient copy and/or information leaflet. Departmental lecture-based teaching sessions were delivered, aiming to educate trainees on the clarity of information given, the impact of expert language, the National Institute for Health Research checklist and departmental information leaflets. A re-audit of 24 consent forms was performed 1 month later. Improvements across all checklist categories were noted. Use of abbreviations decreased from 32% to 4%. Overall, 92% of patients received a copy of their consent form (increasing from 23%), and 75% of patients received information leaflets and had their consent documented in the patient notes, increasing from 18%.

Although effective consent is an essential component of the surgical curriculum as outlined by the Joint Committee on Surgical Training (2021), it is yet to have any compulsory training or assessment. This task is often delegated to junior members of the team, leaving trainees to develop their own skillset (Anandaiah and Rock, 2019).

Departmental teaching is an efficient, cost-effective way of improving compliance with adequate standards in consent and documentation. This can lead to better informed patients, greater patient satisfaction and reduced litigation (Veerman et al, 2019).

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