Dear Sir/Madam,

The legal, forensic, socioeconomic constraints, which tighten surgical practice ever more strictly, do not omit the moral contract which becomes established between a patient and his surgeon. A climate of trust is extremely important and indispensable in any treatment, in particular to any surgical act. In this spirit, I would like to remind you of some of the points evoked during our interview:

• The anaesthetic, whether general, epidural loco-regional or local, carries its own risks. Anaesthetists will give you all necessary explanations during the pre-operative consultations, to which it is essential that you arrive at the indicated deadline.

• The majority of medical treatments, curative, or even preventive (like anticoagulants intended to avoid the occurrence of phlebitis and pulmonary embolisms, or like antibiotics intended to prevent infection), even considered usually as commonplace or harmless, carry their own risk of complications (haematoma, haemorrhage, allergies, etc…) or side effects (digestive, blood, dermatological, etc…).

Generally speaking, the acceptance of the risk of complications, or incidents, even exceptional, but possibly serious, is the inevitable counterpart of the effective outcome hoped by the proposed treatment, whatever it is, even medical.

The absence of treatment itself is never divested of risk, if only by the continued evolution of the initial disease itself.

• It is difficult to give an exact percentage of the risk of complications, because the risk taken is essentially an individual one, depending more on each patient, of his/her history and his/her particularities, than on general statistics. Surgery has it’s limits, and never enables an organ or joint to be ‘re-done’ identical to its original natural creation; of inevitable after effects (if only scarring), mostly minor, must be accepted in exchange for the benefits obtained; a result is never guaranteed in advance, even with the most proven and reliable techniques. Certain antecedents, certain particularities, diseases or conditions (malformations, diabetes, obesity, arthritis or other vascular conditions, alcoholism, tobacco or drug dependency, addictive behaviours, psychiatric conditions, taking certain medicines, liver diseases, blood diseases, tumours, after effects of interventions or traumas, etc.) can cause or encourage particular, sometimes serious, and in extreme cases mortal complications.

• These generalities having been recalled, I would like to list, once again the most frequent and most serious complications which can arise in the course or in the abating of the envisaged surgical operation: failure of the intervention realised, unsatisfactory, disappointing or bad outcome, infection, haematoma, wound separation, late or problematic healing, cutaneous necrosis, unsightly or painful scar, joint stiffness, phlebitis, pulmonary embolism, vascular or nerve compression, eye compression (leading to only very exceptionally, blindness), paralysis, sphincter disorders (urinary or anal), rupture or failure of implant or osteosynthesis materials, delay in consolidation, defect in transplant consolidation (pseudarthrosis), etc.

Most of these complications are cured, often without after effects; others necessitate an appropriate treatment, sometimes even a new surgical intervention; some can persist with serious and permanent functional after effects.

The willpower to heal, motivation, mutual trust, respect for the ample advice given and the observance of the prescribed treatments, are important factors for a favourable evolution and a good final result. Good results happen: they are numerous, even if we speak about them less.

If you don’t accept the risks linked with the surgical intervention, if you are not confident, do not have the operation. Read this letter, perhaps with your family; speak about it with your family doctor/attending physician.

Thank you for handing in the attached documents (signed and dated by your own hand) to my reception staff or to myself, preferably the day of the pre-anaesthetic consultation, at the latest the day of your hospitalization, and be that as it may it is extremely important that they are provided before the date of the intervention:
- RECOGNITION OF INFORMATION and Informed Consent,
- Satisfaction QUESTIONNAIRE about information provided before the intervention.

Their purpose is to provide evidence that you were informed according to your wishes, and that you gave your agreement for the intervention.

Yours sincerely,

Date / / Doctor
Pre-operative explanation letter

Satisfaction Questionnaire regarding information provided before the intervention

JUIN 2007
Dear Sir/Madam,

I have given you, during one or several consultations, information concerning several points. Only your opinion on the information received can allow me to adapt it to best meet your expectations. I therefore thank you for specifying your degree of satisfaction on the following points, using the key below as a guide:

0 = extremely dissatisfied - no information received
1 = dissatisfied – insufficient information
2 = moderately satisfied – sufficient information
3 = satisfied - information thorough
4 = extremely satisfied - information very thorough and complete

<table>
<thead>
<tr>
<th>Type of information</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Welcome by my reception staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Length of time spent in waiting room</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Welcome by myself in my office or treatment room</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Information about your condition</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Information about the spontaneous evolution of your condition, in the absence of treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Information about possible treatments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Information about the arrangements of the hospitalization planned</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Information about the surgical intervention (techniques, prosthesis, etc...)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Information about anticipated results</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Information about the risk of complications</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you have ticked boxes 0, 1, or 2, to questions 4, 5, 6, 8, 9, or 10, it is preferable for us to arrange another meeting, so I can be sure to give you all the information you seem to be missing. Please contact my reception staff who will give you an appointment as soon as possible.

Yours sincerely,

Date …… / …… / ……

Mr – Mrs Doctor

RECOGNITION) of INFORMATION
Informed Consent regarding the intervention

Document handed to patient the : ………/………/…………
Pre-operative explanation letter

I undersigned, Mr/Mrs ................................................... , born on ......../......../........., confirm having been informed by Doctor ............................................., regarding the details, serious and life threatening risks, inherent in all surgical intervention, in particular infections and serious risks, including vital, particularly in relation to the ..................................................... intervention that I must undergo.

I have been informed that there is a certain chance of serious complications, of possible after effects and risks, including life threatening, linked not only to the complaint with which I am affected and the morbid associations of which I may be a carrier, but equally to unforeseen individual reactions, and to a possible therapeutic hazard.

I was able to ask Doctor ............................................. all questions concerning this intervention and I took note, besides the quoted risks, that there is an unpredictability of duration, of particular loco-regional anatomical aspects, of the specificities of healing, as well as exceptional risks, even those unknown.

I have been informed by Doctor ............................................. of the expected benefits of this intervention, of the risk of failure or of a disappointing result, of therapeutic alternatives, also the possible eventuality of a later supplementary operation. The explanations provided were in sufficiently clear terms enabling me to make my choice and ask Doctor ............................................. to carry out this surgical intervention.

I have also been forewarned that during the course of the intervention the surgeon could be faced with an unforeseen discovery or incident imposing complementary intervention or different from that initially planned, and I give advance authorisation, under these circumstances, to Doctor ............................................. to conduct any intervention deemed essential, and if necessary to be assisted by another practitioner. I confirm that the deadline planned between the consultation and date of the intervention seems to me completely satisfactory; I have taken note that, during this time, Doctor ............................................. is at my disposition to respond to any questions from myself or from my family doctor/attending physician.

I expressly commit to attend all planned consultations, and submit myself to all care, all precautions and recommendations prescribed to me before and after the intervention.

This document does not constitute a release from responsibility, but recognition of information and formal consent to a planned intervention.

Mr/Mrs (patient) .....................................................

Signature :
To be preceded by the handwritten note “read, approved, and understood”

Date : ......../......../.........