**(Psychiatry Appointments)**

**Patient Information Leaflet – “Consent- it’s up to you”**

**About consent**

Before your meeting with Dr. El-khayat, we’ll need to ask you for your consent. We’ll ask you to complete a brief form electronically and submit it to us. This form will explain what will happen at your appointment and ask you for your consent for the appointment to take place. This form will also ask for your consent to share information with your G.P. This is important for your own safety. If you are unable to access the electronic form, please let us know and we will find an alternative way to seek your consent to the above before your appointment.

Before the doctor treats you, they need your consent. Sometimes you can simply tell them whether you agree with their suggestions. However, sometimes a written record of your decision is helpful, so you’ll be asked to sign a consent form. If you later change your mind, you’re entitled to withdraw consent – even after signing.

**What should I know before deciding?**

Health professionals must ensure you know enough to enable you to decide about treatment. They’ll write information on the consent form and offer you a copy to keep as well as discussing the choices of treatment with you. Although they may well recommend a particular option, you’re free to choose another. People’s attitudes vary on things like the amount of risk or pain they’re prepared to accept. That goes for the amount of information, too. If you’d rather not know about certain aspects, discuss your worries with whoever is treating you.

**Should I ask questions?**

Always ask anything you want. As a reminder, you can write your questions in the space over the page. The person you ask should do his or her best to answer, but if they don’t know they should find someone else who is able to discuss your concerns. To support you and prompt questions, you might like to bring a friend or relative. Ask if you’d like someone independent to speak up for you.

**Is there anything I should tell people?**

If there’s any procedure you **don’t** want to happen, you should tell the people treating you. It’s also important for them to know about any illnesses or allergies which you may have or have suffered from in the past.

**Who is treating me?**

Amongst the health professionals treating you may be someone in training. They will only carry out procedures for which they have been appropriately trained. Someone senior will supervise – either in person accompanying a less experienced doctor or nurse in training or available to advise someone less experienced.

**Photographs, audio and video tapes**

As part of your treatment some kind of photographic recording may be made – for example clinical photographs or sometimes an audio or video tape. You will always be told if this is going to happen. The photograph or recording will be kept with your notes and will be held in confidence as part of your medical record. This means that it will normally be seen only by those involved in providing you with care or those who need to check the quality of care you have received. The use of photographs and recordings is also extremely important for other work, such as teaching or medical research. However, we will not use yours in a way that might allow you to be identified or recognised without your express permission.

**What are the key things to remember?**

It’s your decision! It’s up to you to choose whether or not to consent to what’s being proposed. Ask as many questions as you like and remember to tell the doctor about anything that concerns you or about any medication, allergies or past history which might affect your health.

**Questions to ask health professionals**

As well as giving you information health professionals must listen and do their best to answer your questions. Before your next appointment, you can write some down in the space below.

Questions may be about the **treatment itself,** for example:

 What are the main treatment options?

 What are the benefits of each of the options?

 What are the risks, if any, of each option?

 What are the success rates for different options – for this unit or for you (the surgeon)?

 Why do you think an operation (if suggested) is necessary?

 What are the risks if I decide to do nothing for the time being?

 How can I expect to feel after the procedure?

 When am I likely to be able to get back to work?