



**CONSENT FOR ACUTE LIMB ISCHEMIA/NECROTISING FASCIITIS**

Name of the patient: \_\_\_\_\_

IPD No: \_\_\_\_\_ Date: \_\_\_\_\_ Age/Sex: \_\_\_\_\_

**Conditions and procedures**

1) We, the undersigned relatives of Mr./Mrs., \_\_\_\_\_ have been explained in detail regarding his/her condition, with the following diagnosis:

a) \_\_\_\_\_ b) \_\_\_\_\_

c) \_\_\_\_\_ d) \_\_\_\_\_

for which \_\_\_\_\_

\_\_\_\_\_ procedure/additional procedures is/are advisable.

Signature: \_\_\_\_\_

**Procedure and its benefits**

Acute ischemia is a condition in which the blood supply to a part of the body is suddenly stopped. This will lead to sudden numbness, cold extremities and restricted or absent movement of the affected limb. If presented late, gangrenous patches may be noted.

The aim of the surgery is to:

a) Restore circulation    b) Prevent sepsis and other renal problems    c) Prevent limb amputation    d) To save life

e) Remove infected tissues

Signature: \_\_\_\_\_

**General risk of the surgery**

**There are risks and complications with the procedures. They include but are not limited to the following:**

- a) As there may be an open wound, there can be oozing of blood, watery discharge from the wound
- b) Blisters over the affected area may develop after the surgery (This may need additional fasciotomy)
- c) Infection of the affected part, which can lead to requirement of high-dose antibiotics or repeat surgery
- d) Sepsis, which may require ICU monitoring and shifting
- e) Impaired renal function, causing acute renal failure leading to need for dialysis
- f) Sudden increase or decrease in blood pressure and diabetic condition
- g) Heart attack or cardiac arrest. This risk is higher in elderly patients with history of heart disease or delayed presentation
- h) Respiratory failure, leading to ventilatory support and intubation
- i) ICU shifting or shifting to another hospital
- j) Need for blood transfusion
- k) Death may occur in case of severe necrotising fasciitis or other septic conditions (Worldwide data estimates mortality rates of approximately 20%–30% in patients with delayed presentation and extensive necrotising fasciitis)

Signature: \_\_\_\_\_

**ACUTE LIMB ISCHEMIA**



**Specific considerations related with the surgery**

- We have been explained in detail regarding the advantages and disadvantages of the surgery
- As acute limb ischemia is an emergency and serious condition it may require repeat interventions like:
  - i) Recurrent arterial thrombosis, which may need repeat surgery
  - ii) Debridement or amputation of certain part of the limb
  - iii) Extending fasciotomy wound
  - iv) Repeated dressings of the wound with special dressing materials or Vacuum-assisted closure or Hyperbaric oxygen therapy
  - v) Aggressive physiotherapy in case of foot drop
  - vi) Full recovery may not be achieved for numbness and foot drop in every patient after surgery
  - vii) Need for plastic reconstructive surgery for secondary closure of the wound

Signature: \_\_\_\_\_

**Risk of not having the procedure done**

- Acute limb ischemia/necrotising fasciitis is a life-threatening condition in which mortality rate is high
- If this condition is not treated, it can lead to amputation of the limb or death
- In acute ischemia, the dead and necrosed muscles release multiple toxic elements including potassium, lactic acid and myoglobin, which in turn can cause damage of kidney and produce dark red-coloured urine (called myoglobinuria)
- There are many toxic elements released in the blood which can cause damage/harm to the vital organs like brain, heart, liver and kidneys. This can lead to septicemia, shock, hypotension and multiorgan failure

Signature: \_\_\_\_\_

**General considerations**

- We have been explained that the patient will require some medicines life long
- Discontinuing medicines or taking tobacco or alcohol or smoking may lead to repeat blockages
- We have been given options to take treatment elsewhere; however, we wish to get treated here
- The treating doctor may change the line of treatment in the best interest of the patient
- No false assurance, warranty or guarantee for the procedure has been given to us by the doctor

**After going through all the details mentioned above, we request to undergo the procedure.**

Signature of the relative: \_\_\_\_\_

Signature of the patient: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**Declaration by the surgeon regarding the procedure**

I hereby declare that I have explained in detail regarding the operative procedure and associated risk factors/complications. I have given detailed explanation to the patient and his/her relatives in the language they could understand and have given them opportunities to ask questions and have given satisfactory answers.

Patient's/Witness's Name: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Patient's/Witness's Signature: \_\_\_\_\_

Doctor's Signature: \_\_\_\_\_

Date & Time: \_\_\_\_\_

Date & Time: \_\_\_\_\_



This specific procedural consent is endorsed by the Vascular Society of India and may be used by vascular surgeons practising in India.

**ACUTE LIMB ISCHEMIA**