

Informed Consent

Carpal Tunnel Release Surgery



INSTRUCTIONS

This is a document to help teach you about carpal tunnel release surgery. You will learn about the surgery, its risks, and other treatments.

It is important that you read the whole document carefully. Please initial each page. Doing so means you have read the page. Signing the consent agreement means that you agree to the surgery you have talked about with your plastic surgeon.

GENERAL INFORMATION

This syndrome occurs when the median nerve is pressed where the hand meets the arm. There is usually more than one cause for this. Surgery may be the best chance to lessen symptoms and prevent loss of nerve function. Some patients may need hand therapy after surgery.

This syndrome affects 4% of the adults in the United States. Carpal tunnel release surgery is common. There are many ways to do the surgery. Talk about them with your plastic surgeon.

OTHER TREATMENTS

Surgery is not the only option. You can go in for other treatments like wearing wrist splints, taking medicines or vitamins, or shooting drugs into the carpal tunnel. Treatment for other conditions, if present, may help reduce the symptoms. All treatments have risks and complications.

RISKS OF CARPAL TUNNEL RELEASE SURGERY

Every surgery has risks that you should know about. Every surgery also has limits. Choosing to have a surgery means comparing the risks and benefits. Most patients do not face problems, but you should talk about them with your plastic surgeon. Make sure you understand all possible outcomes of the surgery.

Scars:

All surgeries leave scars. This too may leave long, obvious scars in the skin or deeper tissues. These may not go away. Scars may look ugly, dark, raised, red, and may even be itchy or painful. Some patients are prone to keloids—prominent, raised, red scars. You may need further treatments or surgery to fix this.

Infection:

You may have an infection after surgery. You may need to go to the hospital for treatment. This could include antibiotics or more surgery.

Hematoma:

Bleeding after surgery can lead to healing problems. You may need more treatment to fix this.

Open Wounds:

The wounds of a carpal tunnel release surgery can open. This can lead to poor results. If this happens, more surgery or other treatment may be needed.

Changes in Feeling:

After surgery, you may have shooting pain. You may also have a burning sensation. This is more likely if you had symptoms for a long time. This can also happen if you have medical problems that affect the nerves. Small nerves may become more active in the scar. This can cause itching or pain. Massage or other therapies may help this. It is important to talk to your surgeon about pain after surgery.

Damage to Nearby Structures:

Nerves, blood vessels, bones, and other tissues may be damaged during surgery. This depends on the



type of surgery or how it is done. More surgery may be needed if this happens. Injury to nearby structures may or may not improve.

Complex Regional Pain Syndrome (CRPS):

This is rare but can happen after surgery. You may have CRPS if you have pain, swelling, redness, and more sensitivity. In some people, CRPS may get better on its own. Others may need more treatment.

Lack of Improvement:

Your carpal tunnel symptoms (loss of feeling, pain, weakness, muscle loss) may not get better after surgery. Symptoms caused by other problems of the arm and neck will not get better. Other medical problems can also damage nerves and limit healing. Some nerve damage cannot be fixed. Even a well-done surgery can have a bad outcome. You may see no improvement. In some cases, you may see loss of function and have more pain.

Relapse:

Carpal tunnel syndrome may come back after surgery. Scars and swelling can press on the median nerve and renew the symptoms. Aging, other diseases, and problems of the neck or arm can bring back symptoms even years after surgery. If this happens, you may need more treatment. You may also need to change the activities that cause the symptoms.

DISCLAIMER

Informed consent documents give you information about a surgery you are considering. These documents explain the risks of that surgery. They also discuss other treatment options, including not having surgery. However, informed consent documents can't cover everything. Your plastic surgeon may give you more or different information. This may be based on the facts of your case.

Informed consent documents are not meant to define or serve as the standard of medical care. Standards of medical care are determined based on the facts involved in an individual case. They may change with advances in science and technology. They can also change with the way doctors practice medicine.

It is important that you read the above information carefully and get all your questions answered before signing the consent agreement on the next page.



CONSENT FOR PROCEDURE OR TREATMENT

1.	I permit Dr and the doctor's assistants to do the procedure Carpal Tunnel Release Surgery.
2.	I got the information sheet on Carpal Tunnel Release Surgery.
3.	I understand that, during the surgery, an unexpected situation may require a different medical procedure than the surgery listed above. I permit the doctor listed above, the assistants and/or designees to provide any treatment that my doctor thinks is needed or helpful. My permission includes all treatments that my doctor does not plan to do at the start of the surgery.
4.	I understand what my surgeon can and cannot do. I understand that no warranties or guarantees have been hinted at or stated outright about the outcome of the surgery. I have explained my goals. I understand which outcomes are realistic and which are not. All my questions have been answered. I understand the surgery's risks. I am aware of other risks and possible issues, benefits, and options. I understand and choose to have the surgery.
5.	I agree to the anesthetics that are needed or helpful. I understand that all types of anesthesia have risks and may result in complications, injury, and even death.
6.	I am aware of the serious risks to my health when blood products are used. I agree to my doctor using them if my doctor, assistants, and/or designees think they are needed or helpful.
7.	I agree to the disposal of any tissue, medical devices, or body parts taken out during or after surgery. I also agree to any additional surgeries or treatment that is needed or helpful.
8.	I agree to have parts of my body photographed or televised appropriately before, during, and after the surgery for medical, scientific, or educational reasons, if the pictures do not reveal my identity.
9.	For medical education, I agree that onlookers can be in the operating room.
10.	I permit my Social Security Number to be given to the right agencies for legal reasons and medical device registration, when necessary.
11.	I agree to the charges for this surgery. I understand that the doctor's charges are separate from the charges for the hospital and the anesthesia. I understand that there may be more charges if more procedures or treatments are needed or helpful. I agree to those charges, if any.
12.	I understand that not having the surgery is an option and that I can opt-out of having the surgery.
13.	IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
	a. THE ABOVE SURGERY TO BE PERFORMED
	b. THERE MAY BE OTHER SURGERIES OR TREATMENT OPTIONS
	c. THERE ARE RISKS TO THE SURGERY
	I CONSENT TO THE SURGERY AND THE ITEMS THAT ARE LISTED ABOVE (1-13). I UNDERSTAND THE EXPLANATION AND HAVE NO MORE QUESTIONS.
	Patient or Person Authorized to Sign for Patient Date/Time
	WitnessDate/Time
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