4: Informed consent

Learning objectives

By the end of this session, students should be able to:

• identify practices and processes that hinder or facilitate fully informed consent
• reflect on your own practice as a student of obtaining consent to examine or interview patients
• develop awareness of key legal requirements and principles relating to informed consent.
• develop an awareness of the issues of consent across the life span, in particular the issue of the mature minor and the person with cognitive losses
• understand the issues related to measuring competence to make decisions and the level of cognitive ability needed to make decisions
• be aware of the various legal and administrative frameworks which protect people without competence and allow decisions to be made in their best interest.

Readings


Codes, guidelines and policies. Medical Board of Australia; 2010


Tutorial activities

Student presentation and discussion of issues of consent raised in the articles and observed on wards. Criteria for valid consent.

Criteria for valid informed consent. Changes to consent law over time.

Differences in consent between Australian practice and other countries.

Discuss the following case


A 45-year-old widow with chronic glomerulonephritis has been on maintenance haemodialysis for ten years. For the last two years she has been deteriorating with multiple complications including poor vascular access. She is not able to have peritoneal dialysis because of previous abdominal surgery with multiple adhesions. She has four children aged 11 to 14 and wants a transplant to allow her to look after them. She has been on the waiting list for two years.
Her family includes a 48-year-old brother, who is a farmer with eight children, who does not want to be tissue typed, and a 42-year-old sister who has been an insulin requiring diabetic for ten years, who is not tissue typed. She also has a 35-year-old brother with severe intellectual disability. He lives in an institution and can manage his own personal care but does not recognise his family nor interact with them. He is unable to comprehend the risks of nephrectomy. His sister with diabetes is his legal guardian. He has been tissue typed and he is an A match with ABO compatibility. (It is predicted that his kidney would give an 85% chance of two-year survival).

The patient’s 14-year-old daughter has been tissue typed and is ABO compatible but has a 2 antigen mismatch. She demonstrates a perceptive, thorough and unemotional understanding of the risks of nephrectomy and the benefits for her mother. (It is predicted that her kidney would give a 75% chance of two-year survival).

Discuss who can give consent to be the kidney donor.