Med Rec. No: < <patient demographics:record="" number="">&gt;</patient>
Surname: < <patient demographics:surname="">&gt;</patient>
Forename: < <patient demographics:first="" name="">&gt;</patient>
DOB: < <patient demographics:dob="">&gt;</patient>

This means the cervix (neck of the womb) is stretched gradually to allow instruments to be used to suck out the contents of the womb.

Under a light general anaesthetic, the cervix is dilated using a series of rods that gradually increase in size until the opening allows a small tube to enter the womb. This is attached to suction equipment and is used to remove the womb's contents.

When the procedure appears to be complete, the surgeon may do a final check, using a curette (long-handled spoon) to scrape the lining of the womb. At the end of the procedure the cervix will close again over a few days.

## RISKS

These are the more common risks. There may be other unusual risks that have not listed here. Please ask **Dr Rana** if you have any general or specific concerns.

I understand there are risks associated with any **anaesthetic**, and I can discuss these with the Anaesthetist. I may have side effects from any of the drugs used. The more common side effects include light-headedness, nausea, skin rash and constipation.

I understand the procedure has the following specific risks and limitations:

- I should expect some cramping abdominal pains after the operation.
- I should expect some light bleeding from the vagina for a few days after the operation.
- My cervix may be torn during the operation, and may require stitches to repair it.
- My womb may be punctured or torn, and while this will usually heal by itself, it may require further surgery (very rarely a hysterectomy i.e. removal of the womb entirely). Such a perforation may cause the uterus to rupture during labour in future pregnancies. This is very rare (9 cases worldwide).
- There is a very small risk I may develop an infection in my womb with fever, pain and an offensive discharge, requiring antibiotics, and occasionally readmission.
- The cervix may lose its firmness after being dilated. This is called cervical incompetence, and in <1% of cases can result in miscarriage or premature delivery in future pregnancies
- Occasionally, if the womb does not contract fully afterwards, heavy bleeding may require a transfusion.
- A blood clot may collect in my womb, requiring another suction procedure.
- Some tissue may remain after the operation (retained products of conception) and a further suction procedure is required.
- Very rarely severe complications could result in death.

I understand some of the above **risks are more likely** if I smoke, am overweight, diabetic, have high blood pressure or have had previous heart disease.

INDIVIDUAL RISKS I understand the following are possible significant <b>risks and complications specific to my individual</b> circumstances, that I have considered in deciding to have this operation:				
	<u></u>			
DECLARATION BY PATIENT				
I acknowledge <i>Dr Rana</i> has informed me about the procedure, alternative treatments and answered my specific				
queries and concerns about this matter.				
I acknowledge that I have discussed with the doctor any significant risks and complications specific to my				
individual circumstances that I have considered in deciding to have this operation.				
I agree to <b>any other additional procedures</b> considered necessary in the judgement of my doctor during				
this operation.				
I consent to a <b>blood transfusion</b> if needed <i>(patient to circle and initial choice)</i> <b>YES NO</b> I have received no guarantee the operation will be a success				
I agree to the disposal by the hospital authorities of any tissues that may be removed during the procedure.				
understand that some tissues or samples may be kept as part of my hospital records.				
If any staff member is injured or exposed to my blood or other body fluid then I give my consent to a sample				
of my blood being collected for the purpose of testing for infectious diseases, such as Hepatitis B, C and HIV. I				
understand that no testing of the				
	nis form to take home with me.	·	-	
Signature of patient		Date		
If the patient is an adult and una	able to give consent, a proxy for	m must be completed and	l attached	
DECLARATION BY DOCTOR				
I declare that I have explained the nature and consequences of the operation to be performed, and				
discussed the risks that particularly concern the patient.				
I have given the patient an opportunity to ask questions and I have answered these.				
Doctor's signature		Date		
Doctor's name				
(please print)	Dr Ritu Rana			
<b>INTERPRETER'S DECLARATION</b> - I confirm I have accurately interpreted the contents of this form and the related conversations between the patient and the doctor				
Interpreter's		Date		
signature				
Interpreter's name			1	
(please print)				