

Laparoscopy for Diagnosis Consent

Laparoscopy for Diagnosis Consent [[EN](#) | [BM](#)]

1. The intended benefits:

- To find a cause of the symptoms

2. Possible serious risks:

- Damage to the bowel, bladder and major blood vessels
- Uterine perforation

3. Possible frequently occurring risks:

- Failure to identify disease
- Bruising
- Delayed wound healing
- Shoulder tip pain
- Incisional hernia

4. Any extra emergency procedures which may become necessary during the operation:

- Laparotomy – 3 to 4 per 1000 procedures
- Repair of damage to bladder, bowel, uterus or major blood vessels

- The overall risk of complications from a diagnostic laparoscopy is approximately 2 to 5 in 1000 procedures.
- I have explained that in obese women, those with underlying medical problems or who have had previous surgery (example: Caesarean section), the quoted risks may be higher.
- Failure to gain entry into the abdominal cavity may result in a laparotomy.
- All operations carry some risk of death. The risk in an operation such as this is estimated at 3 to 8 women in every 100,000 procedures.

I have discussed the advantages and disadvantages of any additional procedures that may be carried out laparoscopically, including:

- dye insufflation
- ovarian / tissue biopsy
- ovarian cyst aspiration
- destruction of minimal endometriosis
- division of minor adhesions
- ovarian drilling

I have also discussed the benefits and risks of any available alternative treatments (including no treatment).

1.Kebaikan yang diinginkan:

- Untuk mengenalpasti punca gejala

2. Risiko serius yang mungkin terjadi:

- Trauma kepada usus, pundi kencing dan saluran darah utama
- Tertembus dinding rahim (Uterine perforation)

3. Risiko yang mungkin berlaku pada kadar agak kerap:

- Gagal untuk mengenalpasti punca masalah
- Lebam
- Luka lewat sembuh
- Sakit terasa di hujung bahu (shoulder tip)
- 'hernia' di parut luka

4. Prosedur tambahan (kecemasan) yang mungkin harus dilakukan semasa pembedahan:

- Laparotomy – 3 hingga 4 kes per 1000 prosedur
- Membaik-pulih kerosakan kepada pundi kencing, usus, rahim serta saluran darah utama

- Secara keseluruhan, risiko komplikasi akibat prosedur seperti ini adalah lebih kurang 2 hingga 5 per 1000 kes.

- Wanita yang gemuk, pernah menjalani pembedahan (seperti caesarean section) atau sememangnya menghadapi penyakit lain, harus faham bahawa risiko yang kerap serta serius seperti yang telah tertera mungkin berlaku pada kadar yang lebih tinggi.

- Kegagalan untuk memasukkan laparoscope kedalam ruang abdomen mungkin akan mengakibatkan pembedahan terbuka.
- Semua pembedahan boleh membawa risiko kematian. Risiko untuk pembedahan seperti ini adalah dijangka 3 hingga 8 per 100,000 prosedur.

Saya telah membincangkan kebaikan serta kelemahan prosedur tambahan yang mungkin perlu dilakukan semasa prosedur ini, termasuk:

- dye insufflation - menyalurkan perwarna melalui tiub fallopian
- ovarian / tissue biopsy – pengambilan contoh tisu
- ovarian cyst aspiration – menyedut keluar cecair dari cyst ovari
- distruction of minimal endometriosis – memusnahkan tisu endometriosis peringkat awal
- division of minor adhesions – melepaskan perlekatan tisu sekiranya sedikit
- ovarian drilling – membuat lubang –lubang halus dalam ovary

Saya juga telah membincangkan kebaikan serta kelemahan rawatan alternatif termasuk pilihan untuk tiada rawatan.