



AMERICAN SOCIETY OF PLASTIC SURGICAL NURSES

Introduction

The American Society of Plastic Surgical Nurses recognizes the importance of protecting the legal rights of patients and maintaining the ethics of healthcare through the practice of informed consent. Informed Consent is "a process by which a patient or participant voluntarily confirms his or her willingness for a proposed medical treatment or non-treatment after having been informed of all aspects of the plan that are relevant to the participant's decision to participate" (Institutional Review Board (IRB), 2016).

Rationale

Empowering patients through the practice of informed consent is consistent with the mission of the American Society of Plastic Surgical Nurses. As plastic surgical nurses, we are in the position to promote patient autonomy by encouraging their active participation in choices about their care. Originating in 1914 with *Schloendorff v. Society of New York Hospital*, informed consent allows patients to utilize impartial input provided by their healthcare providers to determine which treatment they shall undergo or forgo (Mason & O'Neill, 2003.).

American Society of Plastic Surgical Nurses Recommendations

- The plastic surgical nurse should promote consistent, institutional policies that help to ensure enhanced accountability measures to foster trust and recognize the importance of the patient's safety and autonomy (Goetz, 2011).
- The plastic surgical nurse should collaborate with the multidisciplinary team to convey all relevant information to the patient.
- The plastic surgical nurse should ensure that sufficient time has been allowed for feedback that indicates patient comprehension of the process, and the right to consent, refuse, or withdraw (IRB, 2016).
- With the exception of the cases involving emergent care, the plastic surgical nurse should verify that informed consent has been provided by the patient or the patient's legally authorized representative on the appropriate document before allowing patient care to proceed.

References

The Center for Information and Study on Clinical Research Participation. (2013). Perceptions & Insights Study: report on the informed consent process. Retrieved from <https://www.ciscrp.org> April 20, 2016.

Goetz, T. (2011). *The Decision Tree*, 117. New York: NY.

Institutional Review Board (IRB). (n.d.). Retrieved from <http://www.mayo.edu> April 20, 2016.

Mason, N. & O'Neill, O. (2003). *Rethinking Informed Consent in Bioethics*, 70, 185; Lewis Vaughan, *Bioethics: Principles, Issues, and Concerns*, 144-147.

US Food and Drug Administration, Department of Health and Human Services. 2014 Draft guidance: informed consent information sheet. Guidance for IRBs, clinical investigators, and sponsors. Silver Spring, MD.

DISCLAIMER

These clinical practice guidelines and/or recommendations and/or other guidance published herein are provided by the American Society of Plastic Surgical Nurses to assist practitioners in clinical decision-making. The information should not be relied upon as being complete and should not be considered inclusive of all proper treatments, methods of care, or as a statement of the standard of care. All guidelines and recommendations require periodic revision to ensure that clinicians utilize appropriate procedures, and that the materials encompass the recent critical review of literature and expert opinion. The reader must realize that clinical judgment may justify a course of action outside of the recommendations contained herein.

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