

IAS RESEARCH PROJECT: Informed Consent and Adhesions

Have you heard of it? Do you know what it is?

The IAS wants to learn about your experience with Informed Consent forms

THIS INFORMATION WILL BE VITAL TO OUR CAMPAIGN OF AWARENESS AND ACTION

Help the IAS learn more about the information being provided on the hospital (or physician's office) informed consent forms that patients are asked to complete each time there is a surgical procedure performed. This information will help us understand how we can improve awareness about adhesions among doctors and patients. We need to see as many examples of informed consent as possible regardless of whether they mention adhesions or not. WE ARE ONLY INTERESTED IN ABDOMINAL OR PELVIC SURGERY. Please provide your information by December 15th 2002.

A. Please provide a copy of your informed consent form for ABDOMINAL OR PELVIC SURGERY either by:

?? Mail to:

International Adhesions Society, c/o Synechion, Inc., 6757 Arapaho Rd., Suite 711, Dallas, TX 75248

?? Fax: to: 972 931 5476

?? Email: (send scanned image) to Tracy.Joslin@adhesions.org

If you have copies of informed consent forms from more than one surgical procedure, we don't mind if you make multiple submissions as long as it is for different surgical procedures. THE FOLLOWING QUESTIONNAIRE NEEDS TO BE FILLED OUT FOR EACH CONSENT FORM.

B. Complete the following questions, print and send to us by one of the three methods above.

1. Name:
2. City, State, ZIP
3. Telephone number (Day):
4. Telephone number (Evening)
5. Email address:
6. Age at time of surgery
7. Hospital /Medical facility where the procedure took place:
8. Type of procedure:
9. Date of procedure:
10. Gender: Male/Female

11. Were you provided with information about the risks of adhesions and their treatment?

YES

NO

DON'T REMEMBER

12. If the answer to question 11 is "Yes", then how was this information provided? (circle all that apply) Please provide copies of information documents.

WRITTEN WITHIN CONSENT FORM

WRITTEN IN OTHER DOCUMENTS GIVEN TO YOU

TOLD TO YOU BY DOCTOR

TOLD TO YOU BY NURSE

13. Were adhesion barriers used during procedure? (Circle one)

YES

NO

DON'T KNOW

14. If adhesion barrier used – which one?

INTERCEED

INTERGEL

SEPRAFILM

SPRAYGEL

ADEPT

OTHER (state which)

BY PROVIDING US WITH THIS INFORMATION YOU CONSENT THAT WE MAY USE IT. INDIVIDUAL INFORMATION WILL NOT BE PUBLISHED, BUT MASKED OR AGGREGATED WITH OTHER INFORMATION.