

CONSENT FOR TRANSPHENOIDAL SURGERY FOR PITUITARY TUMOUR

I have discussed the procedure of a transphenoidal approach with the patient. I have explained the operative procedure with its intended benefits of tumour removal, to provide a histological diagnosis, and if the tumour is functional to cure the endocrine abnormality and thereby reduce the risk of the long term clinical consequences of raised GH, ACTH, and Prolactin, chiasmal decompression to allow visual field improvement / prevent deterioration.

I have also discussed the risk of potential complications, in particular alluding to:

Persistence / Recurrence of tumour – this may necessitate further treatment with surgery / radiotherapy.

Failure to cure the endocrine abnormality of a functioning tumour

Persistence of a visual field defect

Hypopituitarism which may required long term hormone replacement therapy

CSF leak requiring a fat graft / Lumbar drain

Polyuria due to diabetes insipidus.

Rare complications that have also been discussed :

Meningitis

Postoperative haematoma with acute chiasmal compression which could cause blindness.

Vascular injury : e.g Internal Carotid artery injury – Haemaorrhage, CVA, Pseudoaneurysm formation

Some of these complications may necessitate further surgery.

Signature
Consenting Neurosurgeon

Signature
Consenting Patient

Please print name

Please print name

Date :