

SAMPLE

CONSENT REVIEW

Sleeve Gastrectomy
SAMPLE SAMPLE

SUMMARY: SLEEVE GASTRECTOMY

Attempt Summary

SURNAME:

SAMPLE

GIVEN NAMES:

Sample Sample

PROCEDURE:

Sleeve Gastrectomy

ATTEMPT DATE:

0900 15 June 2025

ATTEMPT:

1

PRACTICE:

ANZMOSS Sample

Question Summary

	QUESTION	RISK AREA	OUTCOME
1	What factors make a leak more likely?	Surgical Risks	Correct
2	How much weight will I lose?	Long-Term Outcomes, Behavioural	Correct
3	Understanding of financial commitment	Informed Decision Making	Confirmed
4	Informed decision to request surgery	Informed Decision Making	Confirmed



QUESTION 1: LEAK RISK FACTORS

What factors make a leak more likely?

The risk of a leak after a Sleeve Gastrectomy is increased by:

OPTIONS:

- a) Smoking
- b) Overeating in the first 2 to 6 weeks of surgery
- c) Diabetes and some medications (Steroids, Immunotherapy and Biologics)
- d) Surgical factors

EXPLAINER:

Correct answers: a), b), c) and, d)

Factors that may contribute to Leaks

- **Smoking:** Impairs healing and increases infection risk.
- **Diabetes:** Affects wound healing and increases complication risks.
- **Obesity:** Higher BMI can increase the strain on surgical sites.
- **Technical errors during surgery:** Issues with stapling or suturing and inadequate blood supply
- **Postoperative vomiting:** Increases pressure on the stomach and can disrupt healing.
- **Overeating or diet noncompliance** after the surgery
- **Infection:** Pre-existing infections can impair the body's ability to heal.

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QUESTION 1: LEAK RISK FACTORS (CONT.)

What factors make a leak more likely?

The risk of a leak after a Sleeve Gastrectomy is increased by:

EXPLAINER CONTINUED...

- **Immunosuppressive** therapy: Medications such as corticosteroids, immunotherapy, or chemotherapy can weaken the immune system and impair healing.
- **Chronic steroid use:** Long-term steroid use can interfere with tissue healing.
- **Advanced age:** Older patients may have slower healing and a higher risk of complications.
- **Chronic inflammatory conditions:** Conditions like Crohn's disease or autoimmune diseases can affect healing.
- **Previous abdominal surgeries:** Scar tissue or adhesions from previous surgeries can complicate the healing process.

QUESTION 2: WEIGHT LOSS

How Much Weight Will I Lose?

The Expected Weight Loss over 2 to 5 years following a Sleeve Gastrectomy (SG) is:

OPTIONS:

- a) 100% because a Sleeve Gastrectomy is a Weight Loss Operation.
- b) 50-65% Excess weight Loss (EWL) and because I have a smaller stomach, I will feel full and won't need to worry about how much I eat.
- c) 100% Excess weight Loss (EWL) but this requires a significant change in my diet and portion sizes, avoiding sugar and processed foods. Adequate sleep and gaining muscle mass through exercise is also important. Weight loss after SG is about 10% less than after a bypass.
- d) 50-65% Excess weight Loss (EWL) but this requires a significant change in my diet and portion sizes, avoiding sugar and processed foods. Adequate sleep and gaining muscle mass through exercise is also important. Weight loss after SG is about 10% less than after a bypass.

EXPLAINER:

Correct answer: d)

Weight loss after a Sleeve Gastrectomy is a journey that requires consistent effort and lifestyle changes. While patients can expect to lose 50-65% of their excess weight, this is achievable only through healthy dietary habits, portion control, regular exercise, and sufficient sleep. Remember, the smaller stomach will help you feel full faster, but success depends on maintaining a balanced lifestyle. Weight loss after a Sleeve Gastrectomy is generally about 10% less than what is achieved with a gastric bypass.

QUESTION 3: FINANCIAL CONSENT

Understanding of financial commitment

Do you feel fully informed:

- about the total costs of your operation,
- including any out-of-pocket expenses and fees for all involved services (e.g., surgeon, anaesthetist, hospital),
- and do you want to proceed with the surgery?

Selected option:

OPTIONS:

- a) Yes. I fully understand all costs and out-pocket-expenses. I have signed a Financial Consent Form.
- b) No. I am unsure of all the costs of the operation and/or I have not signed a Financial Consent Form.

QUESTION 4: MEDICAL CONSENT DECISION READINESS

Do you feel well-enough informed to make the decision to have surgery?

Do you:

- understand the goals, risks and complications of the surgery, and
- are aware of all other treatment options, including NOT having the surgery, and
- request to proceed with having the surgery?

Selected option:

OPTIONS:

a) Yes. I have done all of the above, and request the surgery.

b) No. I don't understand and/or I am not/not yet happy to proceed with the operation.