

1. A third-year pediatrics resident speaks to the parents of a 6-week-old infant with suspected meningitis. The resident recommends that the baby undergo a lumbar puncture. During the consent discussion, the parents ask who will be doing the procedure.

Which statement represents the resident's **BEST** next step?

- a. They should tell the parents that they will be doing the procedure and reassure them that they have done several in the past.
- b. They should tell the parents that they are a resident and that they will be doing the procedure with the attending physician available in the department as needed.
- c. They should explain to the parents that they are a physician undergoing specialty training who works under the supervision of a more experienced physician and that they plan to do the procedure, with their permission.
- d. They should ask the parents whether they would agree to them doing it.

The correct answer is C. The resident should explain that they are a physician undergoing specialty training who works under the supervision of a more experienced physicians, and that they would like to do the procedure with their consent.

2. You are the attending physician in an emergency department where a 94-year-old patient with acute respiratory failure is transferred by ambulance from home. They are unable to communicate coherently. There is no advance medical directive and they are unaccompanied by family.

Which of the following is the **BEST** option concerning initiating treatment?

- a. You should seek consent from an appropriate substitute decision-maker before initiating treatment.
- b. You should treat them immediately despite the lack of consent because this is a life-threatening condition.
- c. You should withhold aggressive treatment until the patient's code status is determined.
- d. You provide comfort care as resuscitation is likely to be medically futile.

The correct answer is B. In life-threatening situations, where the patient is unable to consent and the substitute decision-maker is not available, a physician may do what is immediately necessary to appropriately treat the patient, while respecting any previously known wishes of the patient. Consent should be obtained as soon as reasonably possible.

3. A 13-year-old visits their family physician seeking the contraception. They admit to contemplating sexual involvement with their 13-year-old partner.

Which of the following statements is **MOST** correct about the patient's capacity to consent?

- a. The physician must determine whether the patient is capable of consenting.
- b. The patient's parents can deem them capable of consenting to the treatment.
- c. The patient is not capable of consenting because they are not a mature minor (or has not reached the age of 14 in Québec).
- d. The patient must first demonstrate sound decision-making abilities before being deemed capable of consenting.

The correct answer is A. The physician has the responsibility to assess the capacity of any patient every time a treatment is proposed. Capacity may be presumed unless there are features suggesting an inability to understand the nature of the treatment and its reasonably foreseeable consequences.

4. A judge in a civil action for alleged medical negligence must decide whether the defendant physician met the standard of care in obtaining informed consent for a treatment that resulted in a severe complication.

Which of the following statements regarding informed consent is **MOST** correct?

- a. Judges generally have great sympathy for busy physicians who fail to have an informed consent discussion with patients due to lack of time.
- b. A signed and witnessed consent form does not constitute evidence that an adequate consent discussion took place.
- c. When there is disagreement between the physician and patient over what was said during a consent discussion, judges will usually accept the physician's account of the events.
- d. A physician's testimony about their "usual practice" with respect to informed consent discussions will generally be regarded by judges as having as much evidentiary weight as a contemporaneous note in the medical record.

The correct answer is B. Consent is a process. Documentation of an adequate consent discussion includes a description of the procedure, of its alternatives, and of the risks discussed. Documenting questions asked by the patient also personalizes the documentation and gives it credibility. A signed consent form is generally required by hospital policy, but is not adequate evidence of the consent discussion.

5. A patient with a history of uterine fibroids and dysmenorrhea is seeking care from a gynecologist about options to treat their chronic pelvic pain.

What statement **BEST** represents the approach of the surgeon in order to ensure the patient makes an informed decision?

- a. The surgeon should provide the patient with such information as a reasonable patient in similar circumstances would want to know.
- b. The surgeon should provide the patient with such information as a reasonable physician in similar circumstances would consider appropriate to disclose.
- c. The surgeon should conduct the consent discussion in the presence of a witness.
- d. The surgeon should include information about the option to undergo experimental therapies.

The correct answer is A. When seeking consent from a patient for an investigation or treatment, physicians are expected to provide patients with the information that a reasonable patient in similar circumstances would want to know.