

## Written Acknowledgement Receipt of Surgery Information

- The nature and purpose of the operation/procedure, possible alternative methods of treatment, the expected benefits and complications, attendant discomforts and the risks involved have been fully explained to me. I have been given an opportunity to ask questions, and my questions have been answered to my satisfaction.
- I have received a packet of information informing me of the operation/procedure, risks and complications, instructions regarding preparation for surgery, and home care instructions after leaving the hospital.

The purpose of pre-operative information is to educate you with as many details as you feel you can handle and to help you feel prepared for many of the physical and psychological changes that may occur with this procedure.

Patient/Relative/Guardian	
	Signature
	Printed Name
Relationship, if other than pa	tient signed
Witness	
<b>.</b>	
Date	

St. Vincent Gynecologic Oncology

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