AS - ROYAL

ROYAL VICTORIA HOSPITAL
BELFAST BT12 6BA

CH 3543 K
ADAM STRAIN
Fu [redacted] S 04/08/91
UB
W Musgrave WD/OP CONSULTANT Dr Savage

I, Debra Strain of [redacted]

(being the mother of the above named patient) hereby consent to

the performance of the operation of insertion of urinary catheter under on ~~me~~ the above named GA + further investigation of renal tract (US

patient the nature and purpose of which have been explained to me by

Dr. ~~Mr.Ms.~~ Hodge

I also consent to such further or alternative operative measures as may be found to be necessary during the course of the operation and to the administration of general, local or other anaesthetic for any of these purposes.

*No assurance has been given to me that the operation will be performed by any particular surgeon.

Date 5/6/92 (Signed) Debra Strain *(Patient)*

I confirm that I have explained to the patient the nature and purpose of this operation.

Date 5/6/92 (Signed) Hodge *(Medical Practitioner)*

*This sentence should be deleted in the case of the private patient.

ANAESTHETIC AND OPERATION CONSENT FORM (GENERAL) MR36

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