





www.elsevier.es/mlegal

BRIEF REPORT



Esperanza L. Gómez-Durán^{a,b,c,*}, Berta Ferran-Ballús^a, Laia Torrent Jansà^a, Carles Martin-Fumadó^{a,c}, Josep Arimany-Manso^{b,d}

^a Departamento de Medicina, Universitat Internacional de Catalunya, Barcelona, Spain

^b Servei de Responsabilitat Professional, Colegio de Médicos de Barcelona, Consejo de Colegios de Médicos de Cataluña, Barcelona, Spain

^c Institut de Medicina Legal i Ciències Forenses de Catalunya, Barcelona, Spain

^d Unidad de Medicina Legal, Departamento de Salud Pública, Universidad de Barcelona, Barcelona, Spain

Received 10 August 2015; accepted 14 September 2015 Available online 18 October 2016

KEYWORDS Autonomy; Informed consent document; Consent; Scientific society; Patient safety	 Abstract Introduction: Informed consent document (ICD) must be obtained in those cases defined by law. The development of ICD templates by experts in medical scientific societies would ensure the quality of the information procedure. Method/results: This study tracked (October–December 2014) the website of 152 official scientific societies and identified ICD in just 25.66% of them (39 societies); 56.41% of them (22 societies) offered free access to ICD (462 documents), and the others, restricted public access. Among the 17 societies that offered ICD exclusively for members, access was achieved in 6 of them with a total of 52 ICDs obtained. A 19.04% of the specialties assembled the 94.94% above all the ICD founded. Discussion: The development and accessibility of ICD built by certain scientific societies is wide in certain specialties; however, despite its enormous potential, in the overall analysis it remains insufficient. © 2015 Asociación Nacional de Médicos Forenses. Published by Elsevier España, S.L.U. All rights reserved.
---	---

 * Corresponding author.

2445-4249/© 2015 Asociación Nacional de Médicos Forenses. Published by Elsevier España, S.L.U. All rights reserved.

DOI of original article: http://dx.doi.org/10.1016/j.reml.2015.09.004

^{*} Please cite this article as: Gómez-Durán EL, Ferran-Ballús B, Torrent Jansà L, Martin-Fumadó C, Arimany-Manso J. Accesibilidad a documentos de consentimiento informado a través de las sociedades científicas. Rev Esp Med Legal. 2016;42:67–71.

E-mail address: elgomezduran@comb.cat (E.L. Gómez-Durán).

PALABRAS CLAVE

Autonomía; Documento de consentimiento informado; Consentimiento; Sociedad científica; Seguridad clínica

Accesibilidad a documentos de consentimiento informado a través de las sociedades científicas

Resumen

Introducción: El consentimiento informado precisa ser recogido por escrito en los supuestos establecidos por ley. El desarrollo experto de modelos de documentos de consentimiento informado (DCI) por las sociedades científicas ofrecería garantías a pacientes y profesionales sobre la adecuación del procedimiento de información.

Metodología/resultados: El presente estudio localizó, entre octubre y diciembre de 2014, las webs de sociedades científicas oficiales (152), identificando DCI en tan solo un 25,66% de ellas (39 sociedades), entre las cuales un 56,41% (22 sociedades) ofrecían los DCI en acceso libre (462 DCI), y las restantes, mediante acceso restringido. Se logró acceso a 6 de las 17 sociedades que ofrecían DCI exclusivos para socios, identificándose 52 DCI más. Un 19,04% de las especialidades agruparon el 94,94% de los DCI localizados.

Discusión: El desarrollo y la accesibilidad de DCI elaborados por las sociedades científicas es prolijo en determinadas especialidades, considerándose globalmente insuficiente en el conjunto de sociedades científicas, pese a su enorme potencialidad.

© 2015 Asociación Nacional de Médicos Forenses. Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

Introduction

The respect for the patient's right to decide is a fundamental legal principal in health care, whose importance is acknowledged by health professionals.¹ This right is exercised through informed consent, the procedure by which the patient, duly informed and competent, freely decides among the clinical options available.²

Both autonomous community³ and national legislation, by way of Law 41/2002, basic regulation on patient autonomy and the rights and obligations in terms of clinical information and documentation,² establish that consent, as a general rule, will be verbal; however, written consent must be provided in certain cases which are generically described as: ''surgical intervention, diagnostic procedures and invasive therapies and, in general, the application of procedures that involve risks and discomforts with a well-known and foreseeable negative impact on the patient's health''.²

Beyond the misguided myths existing regarding the informed consent document (ICD),⁴ appropriate patient information on the risks and possible alternatives is essential.^{5,6} It has been reported that the practice and the current standards for informed consent are often not useful for the patient and carry unnecessary risks in terms of medical professional responsibility for professionals.^{7,8} While patient information must be personalized, expert development of personalized ICD templates is recommended, increasing the guarantees for patients and professionals. This is being done by commissions designated for this purpose by autonomous communities⁹ or scientific societites,¹⁰ and they have been legally used as a standard of appropriate information.^{11,12} Access to and availability of those ICDs is basic, given that it guarantees patient autonomy and can serve to support professionals.

This study analyses the availability of such ICD templates through the official websites of the Spanish scientific societies.

Methodology

A list of 174 scientific societies was created based on the list of Scientific Societies of Health Professionals of the Ministry of Health, Social Services and Equality¹³ and the List of Spanish Medical Societies of MediRank.¹⁴ Between October and December 2014, we investigated whether the different societies had webpages, if reference was made to the ICDs in these, and if ICDs were available online, recording the access route to them (limited to members or open). Those societies which had a webpage but did not have an ICD on the webpage (whether open or with limited access) were contacted by email to ask whether they had developed an ICD, and if so, the way of accessing this.

Results

Of the 174 scientific societies, a total of 22 (12.64%) were excluded from the study as not having an official webpage. In the webpages of the remaining 152 (87.36%) societies, only 39 explicitly contain an ICD (25.66%), 22 of them through an open access section and the other 17 with restricted or authorized access. In the specific section of the 22 webpages with open access, a total of 462 ICDs were located. Contact was made with the 17 societies that requested authorized request, and we obtained a response in only 35.29% of cases (n=6). Among these we located another 52 ICDs, which, added to the 462 ICDs registered in open access, made a total of 514 registered ICDs. 113 scientific societies that did not contain ICDs in their webpage were contacted by email, obtaining responses from 53 of them (46.9%); all confirmed that they had not developed ICDs. No response was obtained from the remaining 60. The results are shown in Table 1. The table, for better understanding, groups the different societies together by each speciality, indicating in another column the number of societies which, within this group of

Download English Version:

https://daneshyari.com/en/article/8925447

Download Persian Version:

https://daneshyari.com/article/8925447

Daneshyari.com