

COLORADO ·········· SPINE PARTNERS

Complex Spine Surgery Consent

Complex spine surgery includes repeat spine surgery in the vicinity of previous surgery, <u>multiple levels</u> to be operated on, <u>spinal deformity</u> (scoliosis, kyphosis) surgery, <u>spinal cord compression</u>, emergency surgery, and patients with <u>active medical problems</u> including but not limited to diabetes, heart disease, osteoporosis, and obesity

Complex spine surgery is associated with <u>higher complication rates</u> for superficial and deep infection, bleeding, pneumonia, blood clot formation (pulmonary embolism), re-admission to the hospital, longer stay in the hospital, dural tears, spinal hardware failure or loosening, and weakness of the arms or legs (paralysis), and incomplete improvement of pain.

The purpose of this is to inform you that the risks are greater and the success is generally lower for complex surgery on the spine.

I have read and fully understand this specific addendum to the consent form and understand that I should not sign if all the items, including all my questions, have not been explained or answered to my satisfaction or if I don not understand any of the terms or words contained in this consent form.

Patient name (print)		Date of Birth
Patient signature	Witness	Date/Time
Physician signature		Date/Time