## Patient's informed consent to surgical procedure

Date of the interview Hospital	
	Department
1)	Sex
	□ M □ F
2)	Age
	□<18□18-40□41-60□61-80□>80
3)	Nationality
	□ Italian
	□ Other
4)	What is your marital status?
	☐ Unmarried ☐ Married
	☐ Widow / Widower ☐ Separate / Divorced
5)	What is your higher level of education?
	☐ Primary School ☐ Middle School (professional qualifications)
	☐ High School ☐ College/University
6)	Date of surgical procedure
7)	Type of admission
	☐ Ordinary admission
	□ Day Hospital
	WRITTEN INFORMATION
8)	Have you received a written Informed Consent (IC) form?
	□Yes
	□No

How long before the surgical procedure have you received the IC form?

9)

	□ Just before
	☐ Some hours before ☐ The day before ☐ Other
10)	Who delivered the IC form?
	☐ Operative surgeon
	$\square$ Head physician
	$\square$ Other physician of the surgical unit
	□ Other
11) <b>V</b>	Vho signed the IC form?
	□ Patient
	☐ Parent (if minor)
	$\square$ Legal representative (if interdicted or unable person)
	□ Other
12)	Did you read the IC form before signing it?
	□Yes
	□ No (They just made me sign it; due to lack of time)
	$\square$ No (I did not want to read it)
	☐ Partially. Why?
	☐ Distractedly. Why?
>	
13)	Was the IC form understandable?
	□Yes
	□No
	☐ Partially
	□ Other/Notes
	ORAL INFORMATION
1)	Was the IC form explained during a conversation?
	□Yes
	□ No
	□ Partially
	□Notes

2)	Did you receive further oral information about:
	☐ Your condition: diagnosis?
	☐ Prognosis?
	$\square$ Type of the proposed treatment?
	☐ Expected post-operative progress and possible recovery issues?
	$\square$ Potential benefits of the proposed treatment?
	$\square$ Potential inconveniences (complications)of the proposed treatment?
	$\square$ Alternatives to the proposed treatment?
	☐ Chances of success of the proposed treatment?
	☐ Possible outcomes of a missed treatment?
3)	When did you receive the further oral information?
	☐ Progressively during pre-operative examination ☐ On admission
	$\square$ Before entering the operating room
	$\square$ On delivery of IC form
	□Other
4)	Did you understand what was proposed to you, was the language understandable?
	□Yes
	□No
	☐ Partially
	□ Notes
5)	Did IC form and/or oral information influence the decision to proceed to the surgical
رد	procedure?
	procedure.
	☐ A lot ☐ Somewhat ☐ A little ☐ No
6)	If yes, which one mainly influenced your decision?
	☐ Written IC form
	☐ Oral information
	□Both
7)	Compared to the information received, how much would you want to know?
	□More
	☐ No more, no less
	□Less

Less about risks and complications
8) Have you had the opportunity to ask any questions and have you obtained exhaustive answers?
$\square$ Yes, I asked questions and I had exhaustive answers
$\square$ Yes, I asked questions but I didn't have exhaustive answers
$\square$ No, I didn't ask any questions
9) Received information caused you
☐ More anxiety–your health
$\square$ Worsening of the symptoms
$\square$ More relief regard your health
☐ Improvement in symptoms
HEALTH OUTCOMES
HEALTH OUTCOMES
10) What was the outcome of your surgical procedure?
☐ Successful/normal
☐ Complications
☐ Hospital-acquired infections
11) Were the information received before the surgical procedureabout the post-operative
progress correct?
□Yes
$\square$ No, progress worse than expected
☐ No, progress better than expected
12) Did you receive instructions on the behaviors to keep after the discharge?
□Yes
☐Yes, but I wanted more information
$\square$ No
13) Did you follow post-operative care indications?
□Yes
□No
☐ Partially