ANESTHESIA INFORMED CONSENT

Quick Reference Guide: Anesthesia Informed Consent Requirements vs. Procedural Informed Consent Form Requirements

ACUTE CARE HOSPITAL CRITICAL ACCESS HOSPITAL

Informed consent is an essential process that healthcare providers must follow before any procedure or treatment. Informed consent also applies separately to consent for anesthesia used during procedures or treatments.

The term "informed consent" applies to much more than acquiring the signature of the patient or the patient's legal guardian or representative. In Accreditation Commission for Health Care (ACHC) Standards for Acute Care Hospitals and Critical Access Hospitals, the informed consent process is defined by the standards and the hospital's policies and procedures to ensure the patient comprehends the nature, purpose, benefits, and risks of a proposed procedure or treatment, as well as the available alternatives. The patient or guardian must receive information — in the patient's primary language or through interpreter services — to give the patient enough information to make an informed decision before signing an informed consent form.

The requirements for obtaining and documenting informed consent are clearly outlined in the ACHC Standards. This table highlights the differences between a Procedural Informed Consent Form and an Anesthesia Informed Consent Form.

Effective with the 2025 ACH and CAH Accreditation Requirements Manuals

Differences Between Informed Consent (IC) Forms

ACHC Standard	Informed Consent Requirement	Procedural IC Form	Anesthesia IC Form
Name Requirements on the IC Form			
ACH 10.01.16 CAH 07.00.04	Patient's name and, when appropriate, the legal guardian's name.	X	X
ACH 10.01.16 CAH 07.00.04	Name of the hospital.	X	X
ACH 10.01.16 CAH 07.00.04	Name of the procedure or medical treatment that consent is being given for.	X	X
ACH 18.00.04 CAH 08.03.05	The type (name) of planned anesthesia.		X
ACH 10.01.16 CAH 07.00.04	Name of the responsible practitioner who is performing the procedure or administering the medical treatment and **anesthesia**. **Frequent Deficiency:** The name of the **Anesthesia Practitioner** who will be administering the anesthesia is posing a challenge for hospitals because they often adjust assignments based on the daily surgery	X	X **Options for Compliance** 1. Hospital policy defines the anesthesia providers as "responsible practitioners administering anesthesia" and permits

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	schedule. The *Options for Compliance* listed in the column at right are possibilities; hospitals may meet the requirement in other ways. Hospitals are encouraged to review their policy with their Risk Manager, Compliance Officer, and Hospital Legal Counsel. Standard 18.00.04 requires hospitals to have a policy regarding Patient Consent. You are encouraged to verify that your policy outlines the practice for including the name of the **Anesthesia Practitioner** administering the anesthesia is written on the IC Form.		the use of the *group(s) name* on **the IC Form**. 2. Hospital policy requires the name of the responsible practitioner administering anesthesia to be written on the IC Form. All practitioner names are listed on the IC Form, the name of the specific practitioner who will be administering the anesthesia may be circled or marked by staff or by the anesthesia provider. 3. Hospital policy requires the name of the practitioner administering the anesthesia to be written on the **IC Form**; the name may be written in by staff.
ACH 10.01.16 CAH 07.00.04	Name of the practitioner who conducted the IC discussion with the patient.	X	X
Statement Requirements on the IC Form			
ACH 10.01.16 CAH 07.00.04	Statement that the procedure or treatment, including the anticipated benefits, material risks, and alternative therapies, was explained to the patient or the patient's legal representative. (Material risks could include risks with a high degree of likelihood but a low degree of severity, as well as those with a very low degree of likelihood but high degree of severity. Hospitals are free to delegate to the responsible practitioner, who uses the available clinical evidence as informed by his/her professional judgment, the determination of which material risks, benefits, and alternatives will be discussed with the patient.)	X	X

ACHC Standard	Informed Consent Requirement	Procedural IC Form	Anesthesia IC Form
Signature Requirements			
ACH 10.01.16 CAH 07.00.04	Signature of the patient or their legal representative.	X	X
ACH 10.01.16 CAH 07.00.04	Signature of the person witnessing the patient or the patient's legal representative signing the consent form.	X	X
ACH 10.01.16 CAH 07.00.04	Signature of the practitioner who conducted the Informed Consent Discussion with the patient or the patient's legal representative.	X	X
Date and Time Requirements			
ACH 10.01.16 CAH 07.00.04	Date and time the informed consent form is signed by the patient or the patient's legal representative.	X	X
ACH 10.01.16 CAH 07.00.04	Date and time of the person witnessing the patient or the patient's legal representative signing the consent form.	X	X
ACH 10.01.16 CAH 07.00.04	Date and time the informed consent discussion with the practitioner took place.	X	X