TO THE PATIENT: You have the right, as a patient, to be informed about your condition and the recommended surgical, medical, or diagnostic procedure to be used so that you may make the decision whether or not to undergo the procedure after knowing the risks and hazards involved. This disclosure is not meant to scare or alarm you; it is simply an effort to make you better informed so you may give or withhold your consent to the procedure.

I (we) voluntarily request Dr. __________________________ as my physician, and such associates as he/she may deem necessary (for example anesthesia providers, educational assistants, and other health care providers who are identified and their professional role explained to me) to treat my condition. My condition has been explained to me as:

I (we) understand that the following surgical, medical, and/or diagnostic procedures are planned for me and I (we) voluntarily consent and authorize these procedure(s):

I (we) understand that my physician may discover other or different conditions which require additional procedures than those planned. I (we) authorize my physician, and any associates, technical assistants and other health care providers to perform such other procedures which are advisable in their professional judgment.

I (we) understand that these qualified medical practitioners may be performing significant tasks related to the surgery such as opening or closing incisions, harvesting or dissecting tissue, altering tissue, implanting devices, tissue removal or photography during procedures.

☐ Initial I (we) Do ☐ Do Not☒ consent to the use of blood and blood products as considered necessary. Benefits, risks, alternatives and the risks and benefits of alternatives have been discussed and I (we) have been given the opportunity to ask questions.

☐ Initial Texas Medical Disclosure

HEMATIC AND LYMPHATIC SYSTEM

1. Transfusion of blood and blood components.
   1. Fever.
   2. Transfusion reaction which may include kidney failure or anemia.
   3. Heart failure.
   4. Hepatitis.
   5. AIDS (Acquired Immune Deficiency Syndrome).
   6. Other infections.
Just as there may be risks and hazards in continuing my present condition without treatment, there are also risks and hazards related to the performance of the surgical, medical, and/or diagnostic procedures planned for me, such as the potential for infection, blood clots in veins and lungs, hemorrhage, allergic reactions and even death. I (we) also realize that the following specific risks and hazards may occur in connection with this particular procedure(s):

I (we) Do ☐ Do Not ☐ consent to have one or more manufacturer's technical representatives, as requested by my physician, in the room during the procedure. I understand that one or more representatives from the equipment and/or supply company for the products that the physician will use during my procedure, may be present for the procedure but will not perform any portion of the procedure. I further understand that all manufacturer's technical representatives present have confidentiality agreements and that none of my personal health information will be disclosed to anyone other than my care givers within this hospital.

I (we) Do ☐ Do Not ☐ consent to my physician taking photographs during my procedure as long as my name or identity is not shown to anyone.

I (we) consent to the disposal by hospital authorities of any tissue or parts which may be removed.

I (we) have been given the opportunity to ask questions about my current condition(s), the proposed procedure(s), the benefits, the likelihood of success, the possible problems related to recovery, the possible risks of nontreatment of my condition, and other alternative forms of treatment, and the risks and benefits of alternatives involved. I (we) understand that no warranty or guarantee has been made to me as to result or cure. Any professional/business relationship between my health care providers, the hospital and educational institutions has been explained to me.

I (we) certify this form has been fully explained to me, that I (we) have read it or have had it read to me (us), that the blank spaces have been filled in, and that I (we) understand its contents. I (we) believe that I (we) have sufficient information to give this informed consent and I (we) request the procedure(s) to be done.

______

Initials

Patient's Signature                Date          Time

Other Legally Responsible Person's Signature   Relationship    Date          Time

☐ The Medical Center of Lewisville, 500 West Main, Lewisville, TX 75057-3699
☐ Other: ____________________________

Witness Signature/Title/Position               Date          Time

Witness Work Address

Reason: ____________________________

Interpreter

I have provided the patient/parent/guardian with information on risks, benefits, and alternatives to treatment as outlined in the above within my area of expertise.

Date:  _______________  Time:  _______________  Physician Signature:  X

Medical Center of Lewisville, 500 West Main, Lewisville, Texas 75057-3699

Disclosure and Consent:
Universal Procedure(s)
Blood/ Blood Product Administration
ANESTHESIA CONSENT

TO THE PATIENT: You have the right, as a patient, to be informed about your condition and the recommended anesthesia/analgesia to be used so that you may make the decision whether or not to receive the anesthesia/analgesia after knowing the risks and hazards involved. This disclosure is not meant to scare or alarm you; it is simply an effort to make you better informed so that you may give or withhold your consent to the anesthesia/analgesia.

I (we) understand that anesthesia involves additional risks and hazards, but I (we) request the use of anesthetics for the relief and protection from pain during the planned and additional procedures. I (we) realize the anesthesia may have to be changed possibly without explanation to me (us).

I (we) understand that certain complications may result from the use of any anesthetic including respiratory problems, drug reactions, paralysis, brain damage or even death.

- [ ] Initial General Anesthesia - Injury to Vocal Cords, Teeth, Lips, Eyes; Awareness during the procedure; Memory Dysfunction/Memory Loss; Permanent Organ Damage; Brain Damage.
- [ ] Initial Regional Block Anesthesia/Analgesia - Nerve Damage; Persistent Pain; Bleeding/Hematoma; Infection; Medical necessity to convert to general anesthesia; Brain Damage.
- [ ] Initial Spinal Anesthesia/Analgesia - Nerve Damage; Persistent Back Pain; Headache; Infection; Bleeding/Epidural Hematoma; Chronic Pain; Medical necessity to convert to general anesthesia; Brain Damage.
- [ ] Initial Epidural Anesthesia/Analgesia - Nerve Damage; Persistent Back Pain; Headache; Infection; Bleeding/Epidural Hematoma; Chronic Pain; Medical necessity to convert to general anesthesia; Brain Damage.
- [ ] Initial Monitored Anesthesia Care or Sedation/Analgesia - Memory Dysfunction/Memory Loss; Medical necessity to convert to general anesthesia; Permanent Organ Damage; Brain Damage.

I (we) have been given an opportunity to ask questions about my condition, benefits, risks, alternatives and the risks and benefits of alternative forms of anesthesia and treatment, risks and benefits of non-treatment, the procedures to be used, and the risks and hazards involved. I (we) have sufficient information to give this informed consent.

I (we) certify this form has been fully explained to me, that I (we) have read it or have had it read to me, that the blank spaces have been filled in, and that I (we) understand the contents.

I (we) understand that no promises have been made to me as to the result of anesthesia/analgesia methods.

Initials

Patient's Signature
Date
Time
Other Legally Responsible Person's Signature
Relationship
Date
Time

Witness Signature/Title/Position
Date
Time
Witness Work Address
Reason:

The Medical Center of Lewisville, 500 West Main, Lewisville, TX 75057-3699

Other:

Interpreter

Physician / Proceduralist Responsible for Anesthesia: X

The risks, benefits, and alternatives have been explained and the patient/family understand(s) and agree(s) to the procedure

Physician Identifier
RADIOLOGY

1. Splenoportography (needle injection of contrast media into the spleen).
   A. All associated risks as listed under subsection (b)(2)(B) of this section.
      - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      - Hemorrhage (severe bleeding).
      - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      - Worsening of the condition for which the procedure is being done.
      - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
   B. Injury to the spleen requiring blood transfusion and/or removal of the spleen.

2. Chemoembolization.
   A. All associated risks as listed under subsection (b)(2)(B) of this section
      - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      - Hemorrhage (severe bleeding).
      - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      - Worsening of the condition for which the procedure is being done.
      - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
   B. Tumor lysis syndrome (rapid death of tumor cells, releasing their contents which can be harmful).
   C. Injury to or failure of liver (or other organ in which tumor is located).
   D. Risks of the chemotherapeutic agent(s) utilized.
   E. Cholecystitis (inflammation of the gallbladder) (for liver or other upper GI embolizations).
   F. Abscess (infected fluid collection) in the liver or other embolized organ requiring further intervention.
   G. Biloma (collection of bile in or near the liver requiring drainage) (for liver embolizations).

3. Radioembolization.
   A. All associated risks as listed under subsection (b)(2)(B) of this section
      - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      - Hemorrhage (severe bleeding).
      - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      - Worsening of the condition for which the procedure is being done.
      - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
      - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
      - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
   B. Tumor lysis syndrome (rapid death of tumor cells, releasing their contents which can be harmful).
   C. Injury to or failure of liver (or other organ in which tumor is located).
   D. Radiation complications: pneumonitis (inflammation of lung) which is potentially fatal; inflammation of stomach, intestines, gallbladder, pancreas; stomach or intestinal ulcer; scarring of liver.
4. Thermal and other ablative techniques for treatment of tumors (for curative intent or palliation) including radiofrequency ablation, cryoablation, and high intensity focused ultrasound (HIFU), irreversible electroporation.
   A. Injury to tumor-containing organ or adjacent organs/structures.
   B. Injury to nearby nerves potentially resulting in temporary or chronic (continuing) pain and/or loss of use and/or feeling.
   C. Failure to completely treat tumor.

5. TIPS (Transjugular Intrahepatic Portosystemic Shunt) and its variants such as DIPS (Direct Intrahepatic Portocaval Shunt).
   A. All associated risks as listed under subsection (b)(2)(B) - (D) of this section
      - Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      - Hemorrhage (severe bleeding).
      - Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      - Worsening of the condition for which the procedure is being done.
      - Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      - Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
      - Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
      - Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      - Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
   B. Hepatic encephalopathy (confusion/decreased ability to think).
   C. Liver failure or injury.
   D. Gallbladder injury.
   E. Hemorrhage (severe bleeding).
   F. Recurrent ascites (fluid building up in abdomen) and/or bleeding.
   G. Kidney failure.
   H. Heart failure.
   I. Death.

   A. Chronic (continuing) pain.
   B. Nerve injury with loss of use and/or feeling.
   C. Transient (temporary) headache, nausea, and/or vomiting.
   D. Numbness.
   E. Seizure.

7. Percutaneous abscess/fluid collection drainage (percutaneous abscess/seroma/lymphoceles drainage and/or sclerosis (inclusive of percutaneous, transgluteal, transrectal and transvaginal routes)).
   A. Sepsis (infection in the blood stream), possibly resulting in shock (severe decrease in blood pressure).
   B. Injury to nearby organs.
   C. Hemorrhage (severe bleeding).
   D. Infection of collection which was not previously infected, or additional infection of abscess.

8. Procedures utilizing prolonged fluoroscopy.
   A. Skin injury (such as epilation (hair loss), burns, or ulcers).
   B. Cataracts (for procedures in the region of the head).

Vascular
1. Open surgical repair of aortic, subclavian and iliac, artery aneurysms or occlusions, and renal artery bypass.
   a. Hemorrhage.
   b. Paraplegia.
   c. Kidney damage.
   d. Stroke.
   e. Acute myocardial infarction.
   f. Infection of graft.
2. Angiography (inclusive of aortography, arteriography, venography) - Injection of contrast material into blood vessels.
   a. Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
   b. Hemorrhage (severe bleeding).
   c. Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
   d. Worsening of the condition for which the procedure is being done.
   e. Stroke and/or seizure (for procedure involving blood vessels supplying the spine, arm, neck or head).
   f. Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
   g. Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
   h. Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
   i. Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
3. Angioplasty (intravascular dilation technique).
   A. All associated risks as listed under paragraph (2)(B) of this subsection.
      • Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      • Hemorrhage (severe bleeding).
      • Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      • Worsening of the condition for which the procedure is being done.
      • Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      • Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
      • Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
      • Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      • Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
   B. Change in procedure to open surgical procedure.
   C. Failure to place stent/endoluminal graft (stent with fabric covering it).
   D. Stent migration stent moves from location in which it was placed).
   E. Vessel occlusion (blocking).
   F. Impotence (difficulty with or inability to obtain penile erection) (for abdominal aorta and iliac artery procedures).

4. Endovascular stenting (placement of permanent tube into blood vessel to open it) of any portion of the aorta, iliac or carotid artery or other (peripheral) arteries or veins.
   A. All associated risks as listed under paragraph (2)(B) of this subsection.
      • Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      • Hemorrhage (severe bleeding).
      • Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      • Worsening of the condition for which the procedure is being done.
      • Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      • Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
      • Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
      • Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      • Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
   B. Increased risk of bleeding at or away from site of treatment (when using medications to dissolve clots).
   C. For arterial procedures: distal embolus (fragments of blood clot may travel and block other blood vessels with possible injury to the supplied tissue).
   D. For venous procedures: pulmonary embolus (fragments of blood clot may travel to the blood vessels in the lungs and cause breathing problems or if severe could be life threatening).
   E. Kidney injury or failure which may be temporary or permanent (for procedures using certain mechanical thrombectomy devices).
   F. Need for emergency surgery.
6. Angiography with occlusion techniques (including embolization and sclerosis) - therapeutic.
   A. For all embolizations.
      1. Angiography risks (inclusive of aortography, arteriography, venography) - injection of contrast material into blood vessels.
         a. Unintended injury or occlusion (blocking) of blood vessel which may require immediate surgery or other intervention.
         b. Hemorrhage (severe bleeding).
         c. Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
         d. Worsening of the condition for which the procedure is being done.
         e. Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
         f. Unintended thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
      2. Loss or injury to body parts with potential need for surgery, including death of overlying skin for sclerotherapy/treatment of superficial lesions/vessels and nerve injury with associated pain, numbness or tingling or paralysis (inability to move).
      3. Infection in the form of abscess (infected fluid collection) or septicemia (infection of blood stream).
      4. Nontarget embolization (blocking of blood vessels other than those intended) which can result in injury to tissues supplied by those vessels.
   B. For procedure involving the thoracic aorta and/or vessels supplying the brain, spinal cord, head, neck or arms, these risks in addition to those under clause (1.) of this subparagraph:
      ● Stroke.
      ● Seizure.
      ● Paralysis (inability to move).
      ● Inflammation or other injury of nerves.
      ● For studies of the blood vessels of the brain: contrast-related, temporary blindness or memory loss.
   C. For female pelvic arterial embolizations including uterine fibroid embolization, these risk in addition to those under clause (1.) of this subparagraph.
      ● Premature menopause with resulting sterility.
      ● Injury to or infection involving the uterus which might necessitate hysterectomy (removal of the uterus) with resulting sterility.
      ● After fibroid embolization: expulsion/delayed expulsion of fibroid tissue possibly requiring a procedure to deliver/remove the tissue.
   D. For male pelvic arterial embolizations, in addition to the risks under clause (1.) of this subparagraph: impotence (difficulty with or inability to obtain penile erection).
   E. For embolizations of pulmonary arteriovenous fistula/malformations, these risks in addition to those under clause (1.) of this subparagraph:
      ● New or worsening pulmonary hypertension (high blood pressure in the lung blood vessels).
      ● Paradoxical embolizations (passage of air or an occluding dive beyond the fistula/malformation and into the arterial circulation) causing blockage of blood flow to tissues supplied by the receiving artery and damage to tissues served (for example the blood vessels supplying the heart (which could cause chest pain and/or heart attack) or brain (which could cause stroke, paralysis (inability to move) or other neurological injury)).
   F. For varicocele embolization, these risks in addition to those under clause (1.) of this subparagraph:
      ● Phlebitis/inflammation of veins draining the testiciles leading to decreased size and possibly decreased function or affected testis and sterility (if both sides performed).
      ● Nerve injury (thigh numbness or tingling).
   G. For ovarian vein embolization/pelvic congestion Syndrome embolization: general angiography and embolization risks as listed in clause (1.) of this subparagraph.
   H. For cases utilizing ethanol (alcohol injection, in addition to the risks under clause (1.) of this subparagraph: shock or severe lowering of blood pressure.)
   I. For varicose vein treatments (with angiography) see subparagraph (L) of this paragraph.

7. Mesenteric angiography with infusional therapy (Vasopressin) for gastrointestinal bleeding.
   A. All associated risks as listed under paragraph (2)(B) of this subsection.
      ● Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      ● Hemorrhage (severe bleeding).
      ● Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      ● Worsening of the condition for which the procedure is being done.
      ● Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      ● Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
      ● Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
      ● Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      ● Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
B. Ischemia/infarction of supplied or distant vascular beds (reduction in blood flow causing lack of oxygen with injury or death of tissues supplied by the treated vessel or tissues supplied by blood vessels away from the treated site including heart, brain, bowel, extremities).

C. Antidiuretic hormone side effects of vasopressin (reduced urine output with disturbance of fluid balance in the body, rarely leading to swelling of the brain).

8. Inferior vena caval filter insertion and removal.
   A. All associated risks as listed under paragraph (2)(B) of this subsection.
      • Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      • Hemorrhage (severe bleeding).
      • Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      • Worsening of the condition for which the procedure is being done.
      • Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      • Contrast-related, temporary blindness or memory loss (for studies of the blood vessels of the brain).
      • Paralysis (inability to move) and inflammation of nerves (for procedures involving blood vessels supplying the spine).
      • Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      • Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
   B. Injury to the inferior vena cava (main vein in the abdomen).
   C. Filter migration or fracture (filter could break and/or move from where it was placed).
   D. Caval thrombosis (clotting of the main vein in the abdomen and episodes of swelling of legs).
   E. Risk of recurrent pulmonary embolus (continued risk of blood clots going to blood vessels in the lungs despite filter).
   F. Inability to remove filter (for "optional"/retrievable filters).

   A. All associated risks as listed under paragraph (2)(B) of this subsection.
      • Injury to or occlusion (blocking) of artery which may require immediate surgery or other intervention.
      • Hemorrhage (severe bleeding).
      • Damage to parts of the body supplied by the artery with resulting loss of use or amputation (removal of body part).
      • Worsening of the condition for which the procedure is being done.
      • Stroke and/or seizure (for procedures involving blood vessels supplying the spine, arm, neck or head).
      • Contrast nephropathy (kidney damage due to the contrast agent used during procedure).
      • Thrombosis (blood clot forming at or blocking the blood vessel) at access site or elsewhere.
   B. Cardiac arrhythmia (irregular heart rhythm) or cardiac arrest (heart stops beating).
   C. Cardiac injury/perforation (heart injury).
   D. Death.

    • Thrombosis (clotting) of supplying vessel or branches in its territory.
    • Allergic reaction to thrombin (agent used for direct injection).

11. Vascular access - nontunneled catheters, tunneled catheters, implanted access.
    • Pneumothorax (collapsed lung).
    • Injury to blood vessel.
    • Homothorax/hemomediastinum (bleeding into the chest around the lungs or around the heart).
    • Air embolism (passage of air into blood vessel and possibly to the heart and/or blood vessels entering the lungs).
    • Vessel thrombosis (clotting of blood vessel).
12. Varicose vein treatment (percutaneous via laser, RFA, chemical or other method) without angiography.
   • Burns.
   • Deep vein thrombosis (blood clots in deep veins).
   • Hyperpigmentation (darkening of skin).
   • Skin wound (ulcer).
   • Telangiectatic matting (appearance of tiny blood vessels in treated area).
   • Paresthesia and dysesthesia (numbness or tingling in the area or limb treated).
   • Injury to blood vessel requiring additional procedure to treat.

MISCELLANEOUS

10. Hepatobiliary drainage/intervention including percutaneous transhepatic cholangiography, percutaneous biliary drainage, percutaneous cholecystostomy, biliary stent placement (temporary or permanent), biliary stone removal/therapy.
   A. Leakage of bile at the skin site or into the abdomen with possible peritonitis (inflammation of the abdominal lining and pain or if severe can be life threatening).
   B. Pancreatitis (inflammation of the pancreas).
   C. Hemobilia (bleeding into the bile ducts).
   D. Cholangitis, cholecystitis, sepsis (inflammation/infection of the bile ducts, gallbladder or blood).
   E. Pneumothorax (collapsed lung) or other pleural complication involving chest cavity.

11. Vertebroplasty/kyphoplasty.
   A. Nerve/spinal cord injury.
   B. Need for emergency surgery.
   C. Embolization of cement (cement used passes into blood vessels and possibly all the way to the blood vessels in the lungs).
   D. Fracture adjacent vertabrae (bones in spine).
   E. Leak of cerebrospinal fluid (fluid around the brain and spinal cord).
   F. Pneumothorax (collapsed lung).
   G. Worsening of pain.
   H. Rib or vertebral (spine) fracture.

12. Lung biopsy.
   A. Pneumothorax (collapsed lung).
   B. Hemothorax (blood in the chest around the lung).

   A. Pneumothorax or other pleural complications (collapsed lung or filling of the chest cavity on the same side with fluid.)
   B. Septic shock/bacteremia (infection of the blood stream with possible shock/severe lowering of blood pressure) when pyonephrosis (infected urine in kidney) present).
   C. Bowel (intestinal injury).
   D. Blood vessel injury with or without significant bleeding.

14. Arthrogram: Needle injection of contrast media into a joint space (i.e. shoulder, hip, knee etc.)
   • Allergic reaction to iodinated contrast and/or zylocaine (including Anaphylactoid shock).
   • Vasovagal reaction.
   • Infection (including sepsis).
   • Impaired renal function (including failure).
   • Bleeding with potential hematoma formation.

15. Athrectomy: is a procedure method of removing, mainly, atherosclerosis from a large blood vessel within the body.
   • Adverse reaction to medications.
   • Bleeding.
   • Damage to artery, sometimes requiring surgical intervention.
   • Injury to groin.
   • Reoccurrence of blockage.
   • Embolization.

16. Biopsy Percutaneous - Stereotactic Breast Biopsy with Clip Placement
   • Bleeding with potential hematoma formation.
   • Infection (including sepsis).
   • Damage to organ.
   • Pneumothorax if close proximity to lung field.
   • Adverse reaction to medication.

17. Biopsy Percutaneous - Ultrasound Guided Breast Biopsy with Clip Placement
   • Bleeding with potential hematoma formation.
   • Infection (including sepsis).
   • Damage to organ.
   • Pneumothorax if close proximity to lung field.
   • Adverse reaction to medication.

18. Biopsy Percutaneous - CT Guided Bone Marrow Biopsy
   • Bleeding with potential hematoma formation.
   • Infection (including sepsis).
   • Damage to organ.
   • Pneumothorax if close proximity to lung field.
   • Adverse reaction to medication.

19. Biopsy Percutaneous - CT Guided Renal Biopsy
   • Bleeding with potential hematoma formation.
   • Infection (including sepsis).
   • Damage to organ.
   • Pneumothorax if close proximity to lung field.
   • Adverse reaction to medication.
20. Biopsy Percutaneous - CT Guided Liver Biopsy
- Bleeding with potential hematoma formation.
- Infection (including sepsis).
- Damage to organ.
- Pneumothorax if close proximity to lung field.
- Adverse reaction to medication.

21. Biopsy Percutaneous - Ultrasound Guided Liver Biopsy
- Bleeding with potential hematoma formation.
- Infection (including sepsis).
- Damage to organ.
- Pneumothorax if close proximity to lung field.
- Adverse reaction to medication.

22. Fistulogram with possible Angioplasty and Stenting
- Bleeding
- Infection (including sepsis).
- Damage to vessels.
- Adverse reaction to medications.
- Pain.
- Pulmonary Embolism.
- Damage to parts of body supplied by artery with resulting loss of function or amputation.
- Injury to vessel that may require immediate surgery.
- Re-occurrence of condition.

23. Stress Test - Dobutamine
- Acute Myocardial Infarction.
- Abnormal Blood Pressure.
- Fainting.
- Disorders of heartbeat (ie. too fast, too slow).
- Ineffective heartbeat.

24. Stress Test - Lexiscan
- Acute Myocardial Infarction.
- Abnormal Blood Pressure.
- Fainting.
- Disorders of heartbeat (ie. too fast, too slow).
- Ineffective heartbeat.

25. Stress Test - Treadmill
- Acute Myocardial Infarction.
- Abnormal Blood Pressure.
- Fainting.
- Disorders of heartbeat (ie. too fast, too slow).
- Ineffective heartbeat.

- Pain.
- Bleeding with potential hematoma formation.
- Infection (including sepsis).
- Sustained headache with possible need for blood patch.
- Transient neuromuscular function impairment.
- Vasovagal reaction.
- Meningitis (infection or inflammation of lining of brain or spinal cord).

27. Mediport Placement
- Damage to vessels.
- Infection (including sepsis).
- Pneumothorax.
- Pain.
- Adverse reaction to medications.
- Bleeding with potential hematoma formation.

- Pain.
- Bleeding.
- Infection (including sepsis).
- Damage to organs.
- Adverse reaction to medications.

29. Percutaneous Gastrostomy Tube Placement (PEG)
- Adverse reaction to medications.
- Aspiration.
- Infection (including sepsis).
- Bleeding.
- Peristomal leakage
- Perforation of colon or small intestine.
- Pain.
- Pneumo-peritoneum/Air Trapping.

30. Steroid Injection (ie. metatarsal and other joints etc….)
- Pain.
- Bleeding with potential hematoma formation.
- Infection (including sepsis).
- Allergic reaction to contrast and or xylocaine (including Anaphylactic Shock).
- Vasovagal Reaction.
- Impaired renal function.

31. Transesophageal Echocardiogram (TEE)
- Adverse reaction to medications.
- Bleeding.
- Perforation (esophageal).
- Aspiration.
- Pain.
- Complications that may require surgical repair.

32. Cardioversion: Delivery of an electrical shock to the heart to rapidly restore normal rhythm.
- Stroke.
- Heart Attack.
- Failure to convert rhythm.
- Minor skin burns.
- Life threatening arrhythmias
- Sudden death.
- Adverse reaction to medications.

33. Thoracentesis - Ultrasound guided.
- Pain.
- Bleeding.
- Infection (including sepsis).
- Pneumothorax.
- Adverse reaction to medications.
- Damage to organs.
34. Treatment with Radioactive Iodine for Hyperthyroidism or Thyroid Disease.
   • Slight risk of Thyroid storm or Thyroiditis.
   • Sore Throat.
   • Probable loss of thyroid function, requiring daily medication with Thyroid Hormone.
   • Long Term follow-up.

35. Treatment with Radioactive Iodine for Thyroid Cancer.
   • Destruction of Normal and Cancerous tissue.
   • Need for Thyroid replacement Hormones.
   • Temporary Early Side Effects: Nausea, neck swelling, pain & tenderness in salivary glands, possible decreased White Blood Cells which may increase risk for infection.
   • Late Side Effects from Doses >300mCi: Possible infertility in men, damage to salivary gland, and very rarely other forms of cancer including but not limited to stomach and salivary.

36. Treatment for Metastatic Bone Pain.
   • Low Blood count.
   • Possible transient bone pain.