Position Statement on Witness of Informed Consent

A written, informed consent is one of several essential documents that serve to protect the patient and health care providers. The Joint Commission defines informed consent as, “Agreement or permission accompanied by full notice about what is being consented to.” The Joint Commission continues by applying the definition to tort law by saying informed consent is, “The requirement that a patient be apprised of the nature and risks of a medical procedure before the physician or other health professional can validly claim exemption from liability for battery or from responsibility for medical complications and other undesirable outcomes.” The informed consent protects the patient by making sure he or she is aware of, and understands, his or her medical condition, the surgical intervention(s) being proposed by the surgeon, the risks involved with the intervention(s), and possible outcomes. Obviously, the responsibility for obtaining a written, informed consent is the surgeon’s. She or he is responsible for communicating with the patient all information, as discussed above, as related to the surgical intervention and ensuring the patient understands what is being communicated.

However, the surgeon does not serve as one of the two witnesses to the informed consent. Health care facilities should develop policies that mandate how many witnesses are required, how the verification of the informed consent process took place, and how this will be documented. The policy should be based on established hospital protocols, state medical laws and federal medical laws. On a universal basis, typically two witnesses are preferred who sign the health care facility informed consent document.

Therefore, it is the position of AST that the individual who has graduated from a CAAHEP-accredited surgical technology program and attained the credential of CST, or CSFA, has the knowledge and experience to serve as an authorized witness to the written, informed consent in order to contribute to quality surgical patient outcomes.