



SEMMELWEIS UNIVERSITY

Faculty of Medicine

Department of Pulmonology

Head of the Department

Prof. Veronika Müller M.D., Ph.D., D.Sc

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**Prof. Dr. Veronika Müller, University Professor, Head of the
Department**

**PATIENT INFORMATION AND CONSENT FORM FOR
CHEMOTHERAPY**

English Translation

PATIENT INFORMATION AND CONSENT FORM FOR CHEMOTHERAPY

Patient's name:
TAJ Number (Social Security Number):.....
Place of birth: Date of birth:
Current address:
Phone:
Diagnosis:
Name of performing physician:

Dear Patient!

For your recovery, your physicians recommend chemotherapy, i.e. treatment with anti-cancer drugs. (Chemotherapy = cytostatic treatment)

The aim of chemotherapy:

The aim of chemotherapy treatment is to use cell division inhibiting agents to reduce tumor size, reach a detectable tumor-free state, stop tumor growth, and alleviate symptoms (e.g. pain), thus providing adequate quality of life for you.

How does chemotherapy work?

Both healthy and cancer cells go through growth and division phases. However, because of chemotherapy, the cell cycle is interrupted, leading to cell destruction and cell death. Multiple agents are often used simultaneously in lung cancer treatment plans. The chemotherapy agent reaches cancer cells via the bloodstream throughout the body – it is capable to reach even cells that are inaccessible to surgery or radiation therapy.

Possible side effects:

Unfortunately, chemotherapy affects not only cancer cells but also rapidly dividing healthy cells. These include, for example, the mucous membrane of the digestive tract, the hair follicles, and the formed elements of the blood.

- Because of the effect of chemotherapy on the digestive system, nausea and vomiting may develop, and painful ulcers may form on the oral mucosa.
- The effect on hair and hair follicles results in thinning or loss of hair.
- The decrease in red blood cell count may cause anaemia and fatigue, while the decrease in white blood cell count may lead to infections, neutropenia, and a decrease in platelet count may cause bleedings due to thrombocytopenia.
- More severe side effects may also occur, including toxicity to the skin, lungs, liver, kidneys, heart, stomach, and intestines, headache, fever, abdominal cramps, diarrhoea, pulmonary inflammation, as well as impacts on fertility and reproductive capacity.

During the infusion, it may happen that the vein wall becomes permeable, or the needle is dislodged, and thus the anti-tumor substances causing tissue inflammation or necrosis may escape into the surrounding tissues. In this case, further medical intervention may become necessary.

Side effects can develop depending on the medication used and your body's individual reaction. Our physicians do their best to minimize the risk of side effects. Most side effects cease soon after treatment is discontinued. The chemotherapy plan enables body to replace the destroyed non-cancerous cells during the drug-free period between treatments.

Course of treatment:

Your illness can be treated in a significant proportion of cases with appropriate treatment, but the outcome depends on the severity, progression of the disease itself, as well as on the numerous unforeseeable complications, which may be results of the underlying disease or also a consequence of the treatment.

To counteract possible side effects during treatment (e.g. nausea, vomiting), you may receive preparatory medications or add on treatments.

Chemotherapy drugs are administered orally, by intramuscular injection, intravenous infusion, or through a cannula placed in an artery or vein during surgery. During treatment, various tests may be ordered to monitor your condition, of which your physicians will inform you in time.

Take care of yourself!

Make it a part of your treatment plan to maintain your vitality and general health to the best of your ability. Pay attention to your diet, appropriate exercise, and get enough sleep and rest.

If you have any questions about your condition or treatment, please consult your physician!

Alternative treatments: currently no other equally effective treatment is available.

Possible consequence of not receiving the intervention: progression or worsening of the disease, onset of symptoms.

Consent declaration for the application of chemotherapy

In the case of a patient not eligible to make independent decisions, the name of the legal representative making the declaration:

Legal capacity qualification:

Treating department:

I have completely understood the information described and communicated. I have no further questions in connection with the written and verbal information. I have also received information that I can withdraw the present consent at any time during the treatment.

After reading the patient information and the verbal information, I consent to the application of the proposed chemotherapy:

Budapest, 20.....

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Patient/legal representative

Name, signature and stamp of informing physician

I have understood the information described, I refuse the chemotherapy treatment, I do NOT consent to its performance:

.....
Patient/legal representative

.....
Name, signature and stamp of informing physician

In our presence, as witnesses:

.....
Witness 1.

.....
Witness 2.

Budapest, 20.....