

Re: Female Patients and Informed Consent Oman's cultural background

رد: المرضى الإناث والموافقة المستنيرة الخلفية الثقافية لعمان

Dear Editor,

I read with great interest the recent sounding board article by Al Balushi in the February 2019 issue of *SQUMJ*.¹ The author raised the important issue of informed consent and ensuring that patients understand consent.

However, I take issue with the following point: "Moreover, the informed consent document should be written in the language used most commonly in the country or region. If a patient cannot read or understand the language, a translation should be provided by professional medical translators."¹ Although the reasoning for this is understandable, the implication of this statement is that the consent form should be in one language only and that translators should provide different language versions when needed. Given the shortage of suitable translators at any one time, this would result in various problems and delays; in Oman, there are at least three languages in which informed consent forms should be readily available.

In addition to the author's other suggestions, I would like to add that electronic language tools can be used to test consent form language level. While these types of tools are not fool-proof, they can add an extra layer of support. For English, the Flesch-Kincaid tool that is available by default in Microsoft Word (Microsoft Corp., Redmond, Washington, USA) and the Gunning-Fog tool that is available online can be used. For Arabic, the Automatic Arabic Readability Index or general language tools, such as the Coleman-Liau Index and the Lasbarhetsindex and RIX are possible options.²⁻⁵

Furthermore, physicians should ensure that a patient has understood the informed consent by requesting an explanation. The author does emphasise the need to ensure understanding, but does not provide much guidance on how this can be done. Having a good informed consent form and asking the patient if they understand the information provided to them is a good start; however, this is not a valid way of gauging understanding. If it were, there would not be examinations for students. For example, students would simply have to answer "Do you understand cardiology?" with a "Yes" to be awarded an A grade. As a result, understanding is gauged by the use of an examination. While a patient cannot be given an examination, physicians could do the following: after the consent form is given and all explanations are provided, the patient is asked a simple question "Please explain it back to me." While a patient should not be expected to use all the correct medical terminology, their originally-constructed explanation, which should not be merely parroting phrases the physician used, should rapidly determine whether the patient has understood and is truly informed.

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