produced a number of patient leaflets on contraception.\textsuperscript{18,19} Our study only examined the risks communicated through the written consent form. It is likely that additional information may have been conveyed verbally (with documentation in the medical records) and supplemented through patient information leaflets.

We propose the use of a contraception-specific booklet that would include background information, treatment options with risks and benefits, consequences of not ‘managing’ contraception (i.e. risks of unwanted pregnancies) as well as a template to capture the woman’s risk profile. We believe that this approach would certainly advance the clinician’s position with regard to obtaining fully informed consent. Implementation of such a document across the country would confer consistency to the process of consenting. The verbal, written and psychological aspects that span the doctor–patient relationship cannot be captured and entirely quantified; the spirit in which consenting is conducted may be open to interpretation. Valid informed consent could be viewed as a compass guiding us towards the implementation of good medical practice. We believe that the medico-legal complexity of the written consent form is not accurately understood in clinical practice.

Conclusions

Written consent captured by the NHS model consent form is a legally effective adjunct in obtaining patients’ consent. Our study demonstrates that our current hospital practice for obtaining written evidence of valid informed consent for laparoscopic tubal occlusion is not optimal. It is evident from recent court rulings that unless all common and significant risks of a specific treatment or its alternatives are clearly communicated to the patient, as a claimant a patient would have the opportunity to mount a case of negligence in the care we provide. This study highlights the need to implement a consenting process that is both medico-legally and clinically coherent. Our recommendation is to implement the use of an entity-specific, patient-sensitive information booklet to strengthen that process.

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