

# the ANESTHESIOLOGY<sup>®</sup> annual meeting

American Society of Anesthesiologists<sup>®</sup>

[DAILY NEWS HOME](#)   [ASA TV](#)   [MYMEETING APP](#)   [#ANES19](#)   [ASA WEBSITE](#)   [ARCHIVES](#) ▾

October 22, 2016

Search this website ...

## Privacy pits teen patient's rights against parents' rights

- [Help! Should I Proceed with this Laparoscopic Appendectomy in a Teenage Girl Who Doesn't Know She Is Pregnant?](#)
- Saturday, 4-5 p.m., McCormick Place West, SW Glass Foyer, W185
- Monday, 1:10-2:10 pm., McCormick Place West, SW Glass Foyer, Room W185

### TRENDING NOW

[Education Planner and Claim Credit](#)

[Rovenstine Lecture](#)

[Annual Meeting OnDemand](#)

[Governance Resources](#)

[ANESTHESIOLOGY Future Dates](#)

Consent and privacy can be tricky issues for anesthesiologists, especially when minors are involved. Parents or guardians must generally give consent for surgeries performed on patients who are teens, and those adults generally expect to be informed about every aspect of the case. However, there are occasions when a teenage patient's right to privacy trumps the parental right to know.



**Gee Mei Tan, M.B., B.S.**

"When a teenager finds herself pregnant, the entire picture changes," said Gee Mei Tan, M.B., B.S., Associate Professor of Anesthesiology at Children's Hospital Colorado Anschutz Medical Campus, Aurora. "When she gets pregnant, it becomes a private matter. In most states, she has the absolute right to keep that information from her parents. As the anesthesiologist or the surgeon, you will be in a difficult position. If the girl tells you not to disclose the pregnancy to her parents, in almost all states you must keep the pregnancy confidential."

Dr. Tan and her former fellow, Sharon Carrillo Couch, M.D., Assistant Professor at University of Texas Southwestern Medical School, will explore potential conflicts between different rights during "[Help! Should I Proceed with this Laparoscopic Appendectomy in a Teenage Girl Who Doesn't Know She Is Pregnant?](#)" As the anesthesiologist, it is absolutely vital to discuss the potential consequences of surgery during pregnancy with the patient. If

the patient chooses not to share that information with her parents or guardian, the anesthesiologist is bound by patient-doctor confidentiality to keep the pregnancy private.

“Not operating is a choice, but not a popular one with surgeons because of the risk involved,” Dr. Tan said. “In most cases, we will go ahead with the appendectomy. The problem comes when the girl says she does not want to have surgery because there is risk to her and the fetus, but still insists on not disclosing the pregnancy to her parents. That’s not the kind of situation most of us ever saw in medical school.”

Surgery and anesthesia pose risks to both mother and fetus. Those risks can be minimized by using different medications and anesthetic techniques rather than standard general anesthesia. Altering anesthesia may help calm the patient’s concerns about potentially harming her baby, but it may not help hide the pregnancy.

An appendectomy is a fairly common surgery, Dr. Tan noted, so it is not unusual for a parent to have multiple children who have had their appendix removed. They have likely seen the consent form before, or something similar, including general anesthesia and the risks associated with it. Presenting a consent form that includes something other than a general anesthetic may raise questions about what is so different about *this* appendectomy.

“We advocate open communication between the teen patient and her parents, Dr. Tan said. “We may not be trained to facilitate that kind of dialogue, but the hospital almost certainly has resources that we can call upon. We recommend calling for social work and risk management’s expertise, which sometimes brings in the legal department. They can talk with the girl and go over her options. They are trained to help her maneuver the system, and guide her if she decides to keep the pregnancy a private issue from the parents.”

Working with the hospital also eases the way for the anesthesiologist. Legal requirements and standard practices vary from state to state. Social workers are particularly helpful in working through the decision.

“Social workers have the tools to explain not just the medical part, which we can do, but the social and legal issues surrounding the teen patient’s decision, whatever she decides.” Dr. Tan said. “As physicians, we are usually not equipped with the tools to deal with these conflicting sets of rights that are so far removed from medical management. As the anesthesiologist, you need to know where to get help.”

[Return to Archive Index](#)



