

Patient
Label

What Matters to You in Choosing Surgery for Stress Urinary Incontinence?

Shared-Decision Tool for Patients

**PLEASE COMPLETE AND HANDBACK THIS FORM TO
A MEMBER OF STAFF OR PUT IN THE POST**

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A) Why complete this form?

Introduction

We are working to improve Person-Centred Care for women considering surgery for stress urinary incontinence. It is important that the type of surgery chosen is personalised. As well as being safe and effective, surgery will focus on your individual needs and preferences as much as possible.

We know that by finding out a bit more about you, we can improve shared-decision making and subsequently the overall outcome of surgery. One of the ways to make this better is for the doctor/surgeon to find out what is important to you. During decision-making, it is important to establish with your doctor/surgeon '*what matters to you*'.

If we know some things about you, it will allow us to get to know you as a person rather than just as a patient, as well as know what is important to you. Also having information about your routine activities allows us to adapt our care. Please complete page 3 and page 7 and hand back.

What happens after I complete this form?

Please hand back to a member of staff or put in the post to us. Our team will discuss your condition and your choices during our dedicated meeting. Your clinician will inform you of the outcome of team discussions, especially if there are further recommendations to consider.

What if I do not want to give the information?

If you don't feel like sharing the information, please inform a member of staff so we don't bother you by asking. However if you change your mind, we will be happy to help you complete it.

Can I change the shared information once I have completed it?

Yes, we recognise that *what matters to you* may change during the decision-making process. For example, you may have concerns about recovery from a particular operation, but as you find out more about it, this may no longer be important. You can change what you provide at any time as it's your shared information.

Quotes from previous patients

"This is great, makes me feel that you want to take the time to know me."

"The form was easy to use and made me think about what is really important to me."

B) My values - What matters to me?

- Please let us know what is important to you from the list of values below.
- A member of staff can help you complete it, if you wish.
- Some things that matter to you may be physical, psychological/emotional or social.
- Or it could be something completely different. There are no “right or wrong” answers as it is about you.

Please add a value from 0 to 10 (0 low priority, 10 high priority) next to each of the following items:

What matters to you examples	Importance out of 10	Top 3 (Please tick)
• Cure from leakage	0 1 2 3 4 5 6 7 8 9 10	
• Just using less pads	0 1 2 3 4 5 6 7 8 9 10	
• Avoid repeat surgery in the future	0 1 2 3 4 5 6 7 8 9 10	
• Undergoing Day Surgery	0 1 2 3 4 5 6 7 8 9 10	
• Shorter hospital stay	0 1 2 3 4 5 6 7 8 9 10	
• Quick recovery and quick return to normal activities	0 1 2 3 4 5 6 7 8 9 10	
• Avoid major abdominal surgery	0 1 2 3 4 5 6 7 8 9 10	
• Avoid future surgery for prolapse	0 1 2 3 4 5 6 7 8 9 10	
• Least pain after surgery	0 1 2 3 4 5 6 7 8 9 10	
• Avoiding mesh complications	0 1 2 3 4 5 6 7 8 9 10	
• Avoiding self-catheterisation	0 1 2 3 4 5 6 7 8 9 10	
• Avoid general anaesthesia	0 1 2 3 4 5 6 7 8 9 10	
• Avoid local anaesthesia	0 1 2 3 4 5 6 7 8 9 10	
• Other _____	0 1 2 3 4 5 6 7 8 9 10	

Examples that people have used before

Physical

- How I prefer to have surgery e.g. which anaesthetic / pain relief
- I find it difficult to be awake during surgery
- I am concerned about foreign materials left permanently inside my body.
- I do not want to stay overnight in hospital

Psychological/Emotional

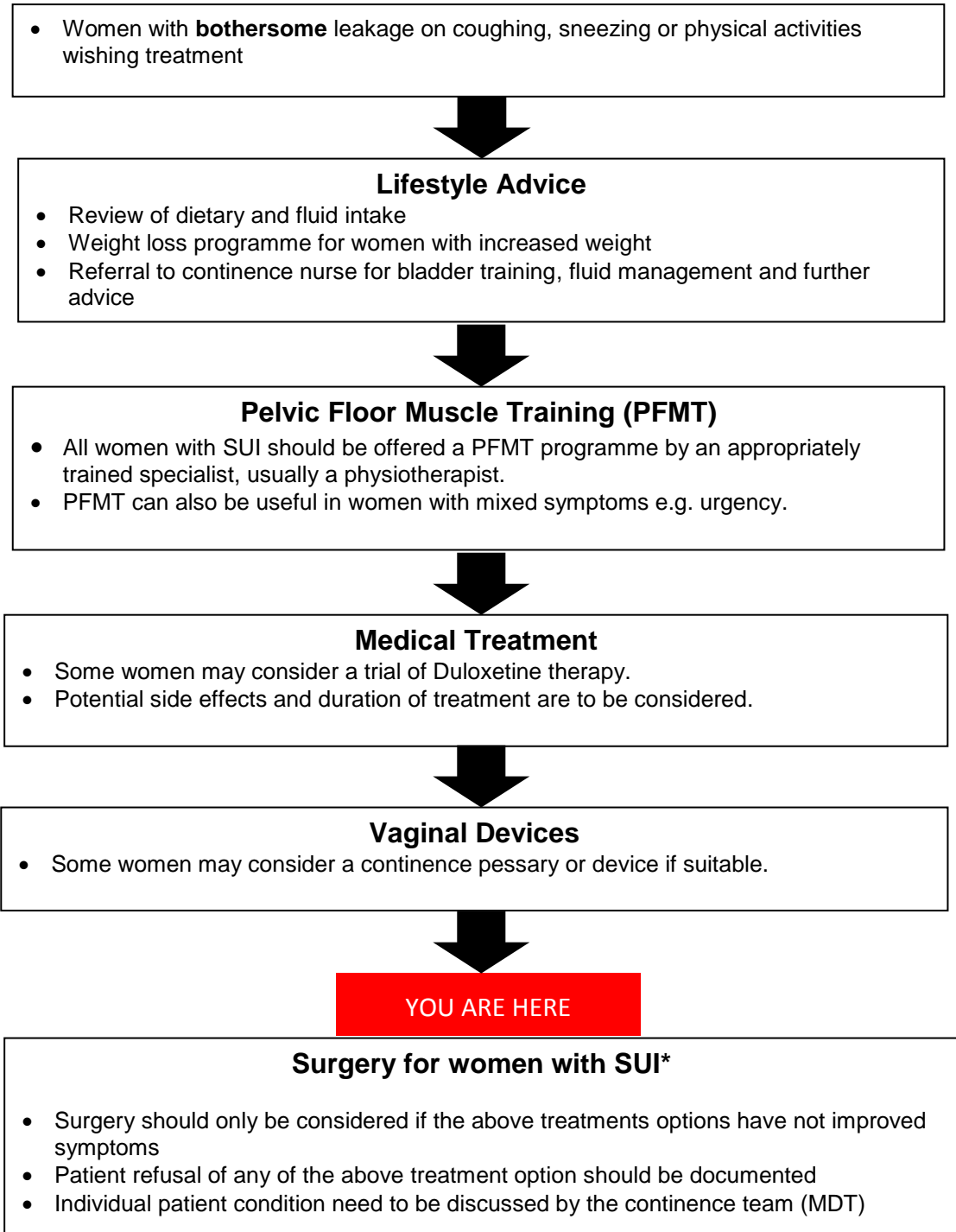
- The information I need in a way that I understand
- I feel isolated in the room on my own and need staff to check in on me regularly.
- I am not good at tolerating pain at all and get distressed quite quickly. It is important for me to get pain relief on time.
- I live a long way from the hospital and am not able to return for repeat treatment. It is important for me to receive treatment that works in the long-term.

Social

- I would like my family (daughter) to be involved in the decision.
- My elderly husband will need to be in respite care while I am in hospital. It is important that I involve him in this decision too.

C) My non-surgical options

Reminder of the Management Pathway for Women with Stress Urinary Incontinence



** Please ask your doctor for the specific leaflet of the treatment(s) you are considering.*

Referral to a different clinician (or a different hospital) may be required, depending on availability of surgical procedures

D) My surgical options

Table comparing the main advantages and disadvantages of the four surgical procedures for treatment of stress urinary incontinence in women

Procedure	Main Advantages	Main Disadvantages	What if it does not work?
<p><u>Mesh Tape</u> Surgery where a piece of plastic mesh tape is inserted to support the urethra (tube that carries urine from the bladder to outside the body).</p>	<ul style="list-style-type: none"> • Day surgery • Quick recovery • The standard procedure since year 2000 	<ul style="list-style-type: none"> • Mesh complications (can cause long-term pain and may require surgical removal) • Long-term risks remain unknown 	<ul style="list-style-type: none"> • Repeat surgery carries increased risks and technical difficulties • Repeat surgery may be less successful
<p><u>Colposuspension</u> Surgery where the neck of the bladder is lifted upwards and stitched in place.</p>	<ul style="list-style-type: none"> • Avoids mesh complications • The standard procedure prior to year 2000 • Can be done by keyhole surgery (some units) 	<ul style="list-style-type: none"> • Major abdominal surgery • Risk of future pelvic organ prolapse (may require surgery) 	
<p><u>Natural Tissue Sling</u> Surgery where a sling of your own tissues is inserted around the neck of the bladder to support it.</p>	<ul style="list-style-type: none"> • Avoids mesh complications • Higher cure and improvement rate 	<ul style="list-style-type: none"> • Major abdominal surgery • Higher risk of difficulty emptying the bladder (need for self-catheterisation) 	
<p><u>Urethral bulking agents</u> Surgery where a substance is injected into the walls of the urethra to increase its size and allow it to remain closed with more force.</p>	<ul style="list-style-type: none"> • Avoids mesh complications • Day surgery (usually local anaesthesia) • Least invasive as no skin cuts 	<ul style="list-style-type: none"> • Short-term success compared to other surgical procedures • Repeated injections may be required – no reliable evidence on long-term success 	

E) My Choice (PLEASE COMPLETE THIS TABLE)

Procedure	I will choose this option because...	I will NOT choose this option because...
Mesh Tape		
Colposuspension		
Natural Tissue Sling		
Urethral bulking agent injection		

Patient's signature:Patient Name:: Date:.....

Please write any further comments here:

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Procedure	Outcome of MDT Discussion Date:	Outcome of further patient consultation if necessary Date:
Mesh Tape		
Colposuspension		
Natural Tissue Sling		
Urethral bulking agent injection		

Clinician's signature:Clinician's Name:: Date:.....