

INFORMED CONSENT RUBRIC							
	0 (Not done)	1 (Area of Improvement)	2 (Competent)	3 (Exemplary)	Score	Score Justification	Improvement Advice
(1) Introduction and Patient Perspectives							
Introduction	No introduction made	Introduces first name but not role	Introduces full name and role with a respectful tone that is somewhat formulaic or lacking warmth	Introduces self by full name and role using warm, patient-centered approach that builds rapport			
Use of Interpreter	Not done	Attempts to use a non-authorized interpreter (family member, google translate, etc.)	Appropriately uses professional interpreter when needed, though with limited integrated into the encounter	Proactively and seamlessly incorporates professional interpreter, ensures understanding, and maintains engagement/rapport directly with patient	N/A	N/A	N/A
Elicits Patient Concerns	Ignores patient concerns	Acknowledges patient concerns, but does not elicit them	Actively elicits and acknowledges patient's concerns	Explores and addresses explicit concerns Follows up on cues about implicit concerns			
Addresses Concerns	Does not demonstrate awareness of concerns	Demonstrates awareness of concerns	Demonstrates awareness of concerns and attempts to address them	Demonstrates awareness of concerns and successfully addresses them			
Integrating Patient Preferences	Belittles patient preferences/their perspective	Acknowledges patient preferences, beliefs, or values, but does not elicit them	Actively elicits patient preferences, beliefs, or values	Actively elicits patient preferences, beliefs, or values and integrates them into the discussion			
Addressing Patient Emotions	Belittles patient emotions Undermines patient's prior experiences with the medical system	Ignores patient emotions Does not acknowledge patient's prior relevant experiences with the medical system	Acknowledges patient emotions, prior relevant experiences, and probes further when relevant	Anticipates emotional reactions, asks about patient feelings, and explores sources of emotional support when relevant Acknowledges patient's prior relevant experiences with the medical system			

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(2) Informed Consent							
Information Sharing Practices	Provides no information related to concern Ignores requests for information Unwarranted self-disclosure	Provides incorrect information or information unrelated to that does not fully address the patient's concerns	Gives information that is specific and clear Encourages questions Addresses questions Checks for understanding with open-ended questions	Tailors information to patient's concerns, values, meaning, life-context, and readiness Explores interest in receiving further information Checks for understanding using advanced techniques (e.g. "Teach-Back" or "Ask-Tell-Ask")			
Word Choice	Ignores patient's efforts to clarify jargon Uses unprofessional language	Moderate use of technical jargon without clarification unless prompted by the patient	Uses words patient understands with technical jargon defined without prompting Answers questions about technical jargon	Tailors language to patients' health literacy level Verifies understanding of technical words, explaining if needed			
Illness Knowledge	Belittles or ignores patient's understanding of their illness or situation	Engages with patient's understanding of their illness or situation only when brought up by patient	Elicits patient understanding of illness or situation and engages, though interaction may be limited in depth	Actively explores and validates patient's perspective and understanding of their illness/situation, highlighting areas of similarity between patient's understanding and medical science			
Explains Nature of Condition & Need for Surgery	Not done	Provides incomplete, misleading, or incorrect information Communicates information in an overly technical manner	Clearly explains condition and the reason surgery is indicated, in understandable terms	Thoroughly explains condition and rationale for surgery in patient-centered language, checking for comprehension and tailoring explanation to patient's baseline knowledge.			
Explains Contraindications	Does not mention contraindications or dismisses patient concerns about factors that may preclude surgery	Provides incomplete, misleading, or incorrect information Communicates information in an overly technical manner	Clearly explains relevant contraindications in understandable terms, linking them to the patient's situation when appropriate	Thoroughly discusses contraindications, tailoring explanation to the patient's condition and values, checks comprehension, and contextualizes why they matter in the decision-making process			
Explains Nature of Procedure	Not done	Provides incomplete, misleading, or incorrect information Communicates information in an overly technical manner	Provides a clear, accurate description of the procedure in understandable terms	Gives a clear, patient-friendly description with context (what will happen before, during, after), using visuals/analogies if needed and confirming understanding.			
Explains Risks	Not done	Provides incomplete, misleading, or incorrect information Communicates information in an overly technical manner	Clearly describes common and serious risks in understandable terms	Provides a balanced, patient-centered discussion of risks (common + serious), checks for understanding, and relates discussion to patient's concerns and values			
Explains Benefits	Not done	Provides incomplete, misleading, or incorrect information Communicates information in an overly technical manner	Clearly explains expected benefits of the procedure in understandable terms.	Thoroughly explains realistic benefits, frames them in the context of the patient's condition/goals, and ensures patient understanding.			
Explains Alternatives	Not done	Provides incomplete, misleading, or incorrect information Communicates information in an overly technical manner	Provides clear, accurate explanation of reasonable alternatives (including no treatment).	Thoroughly discusses alternatives, including risks/benefits, and engages patient in considering them in decision-making.			
Encourages Questions	Not done	Allows questions if asked but does not invite them.	Invites questions and answers them respectfully.	Actively encourages and normalizes patient questions, checks for additional concerns, and ensures patient feels comfortable voicing them.			
Avoids Coercion	Coerces patient	Provides information but with subtle bias toward one choice, without fully supporting autonomy.	Presents information neutrally, supports patient autonomy, avoids undue influence.	Actively emphasizes patient autonomy and fosters a supportive environment for autonomous choice.			
Assesses Capacity	Ignores signs of impaired capacity or assumes capacity without consideration.	Makes minimal or inconsistent attempts to assess understanding/capacity.	Checks patient's ability to understand, appreciate, reason, and communicate a choice in a straightforward way.	Thoroughly and respectfully assesses capacity, adapting communication as needed, and documents/acts appropriately if concerns arise.			

(3) Overall Feedback	
Key Strengths	
Priority Improvements	

(4) Summary Statement
Total Score: ____ / 51