

# Intimate examinations should not be performed without consent

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## **Editorial: Informed consent and intimate examinations**

Intimate examinations, performed by medical students on anaesthetised patients, are often carried out without adequate consent from patients, but this violates their basic human rights and should not be allowed, claims an editorial in the July issue of *Student BMJ*.

Although the examination of patients under anaesthesia provides a unique opportunity for medical students to practice with minimal distress to patients, it is vital that students put their responsibility towards patients before any learning opportunity, write Ohad Oren and Gershon Grunfeld from the Technion-Israel Institute of Technology in Israel.

The issue was highlighted earlier this year when Israeli medical students refused to intimately examine anaesthetised women without obtaining their informed consent.

Yet despite these concerns, some specialists consider pelvic examinations to be an ordinary part of medical practice for which specific consent is not needed, say the authors, while others fear that requiring informed consent from the patient will radically reduce training opportunities for students. There is also the presumption that patients understand that medical students and junior doctors will be involved in their care because they are being treated at a teaching hospital.

But according to the authors, this misses the point of informed consent

and deprives patients of their choice as independent decision makers about their own medical care.

Performing intimate examinations on patients without their explicit consent is "a gross violation of the principle of respect for patients' autonomy", they argue.

The authors conclude by calling for the development of responsible hospital policy conducive to ethical practice and new well organised processes for obtaining consent.

In an accompanying feature, Daniel Stott examines the role of chaperones in intimate examinations for the protection of both patients and doctors, and discusses how the new emphasis on chaperones creates pressure on already "hard pressed" resources.

Source: BMJ-British Medical Journal

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