

## Procedure Consent

**This common office procedure takes only a few minutes and involves the insertion of a rigid scope in the mouth. Unless medically constrained, topical anesthetic may be sprayed into the oral cavity before the examination. This may make the throat feel numb for 20 to 30 minutes and difficulty swallowing or the illusion of swelling is possible. This procedure is quite safe, however some minor risks do exist. These include discomfort, gagging, and reaction to anesthetic. An additional procedure that may be utilized involves the passage of a thin telescope through the nose and into the throat.**

**I, the undersigned, have read the information above and give my informed consent to proceed with the videostroboscopy procedure. I understand that I may refuse this procedure.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Witness**

\_\_\_\_\_  
**Date**