

# Consent

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1. Emergency Treatment: In a medical emergency, where prompt treatment is necessary to prevent death or serious disability or to alleviate severe pain, treatment can be provided even if the patient or his/her legal representative is unable to give consent
2. Minors
  - a. When a minor (under age 18) requires medical treatment, consent must be obtained from the person with legal authority to consent on behalf of the minor, which is usually a parent, a guardian, or a third party authorized to consent on behalf of the minor, unless the minor can consent on his/her own behalf or the minor has an emergency condition
  - b. When third parties, other than a parent, consent for treatment of a minor, the documentation showing the authority of the third party to consent must be obtained, such as the court order (for the guardian), the Authorization Form for Third Party Consent (Form 10280), or Caregiver's Authorization Affidavit (Form 10279).
  - c. In general, either parent may consent to treatment for a minor, unless there is documentation in the form of a court order showing that the parent does not have that right.
3. Minors with Legal Capacity to Consent to their own Medical Treatment
  - a. Certain minors may consent to medical or surgical care on their own behalf without parental consent.
  - b. These include patients who are:
    - i. Serving on active duty in the armed forces
    - ii. "Emancipated" minors who have received a court order of emancipation and who hold a Department of Motor Vehicles identification card indicating that the minor is emancipated.
    - iii. Self-sufficient minors, 15 years of age or older, who demonstrate themselves to be self-sufficient because they live separate and apart from their parent or legal guardian and manage their own affairs, regardless of the source of income.
    - iv. Married or formerly married minor. A copy of the marriage certificate shall be placed in the patient's permanent medical record. If the certificate is unavailable or is not furnished, whenever possible, consent of the minor's parent or legal guardian shall be obtained.
  - c. Circumstances Under Which a Minor May Consent to his/her own Medical Treatment
    - i. Alcohol or Drug Abuse: 12 years of age or older, may consent to medical care or counseling relating to the diagnosis and treatment of an alcohol or drug related problem.
    - ii. Blood Donation: 17 years of age or older, may consent to donating blood.
    - iii. Communicable Diseases. Minors, 12 years of age or older, may consent to treatment for an infectious, contagious, sexually transmitted, or communicable disease that must be reported to the local health officer.

- iv. Experimental Drugs. Minors, 7 years of age or older, who are to be given experimental drugs, must give consent to such treatment. The minor's consent is in addition to his/her parents' or legal guardian's consent.
  - v. Mental Health. Outpatient mental health treatment or counseling may be provided to a minor 12 years of age or older, if in the opinion of the attending professional person, the minor is mature enough to participate intelligently in the mental health treatment or counseling.
  - vi. Pregnancy-Related Care. Minors, regardless of age or marital status, may consent to treatment for care and prevention of pregnancy, including the termination of pregnancy (as long as the minor has the requisite maturity and understanding to give an informed consent).
  - vii. Sexual Assault. Minors may consent to medical or surgical care related to the diagnosis and treatment, including the collection of evidence, of alleged rape or sexual assault. In the case of an alleged sexual assault, the hospital staff shall attempt to contact the parent or legal guardian, and note in the medical record the date and time if such contact was attempted. The hospital is not required to attempt to contact the parent or guardian if the hospital reasonably suspects that the parent or legal guardian is the suspected perpetrator
4. Children of Minor Parents: A minor parent may consent to medical or surgical treatment for his or her child, provided that the minor has the capacity, as explained in section F below, to make such medical decisions.
  5. Non-Emergent Treatment: In cases where it is non-emergent, but necessary care is anticipated in order to prevent the deterioration or aggravation of the patient's condition, and the patient's parents or legal guardian is unable or unwilling to consent to such treatment, the Risk Management Department should be immediately contacted for further guidance.
  6. Informed Consent Discussions with Minors
    - a. Informed consent discussions with minors should be conducted at a level that can be understood by the minor.
    - b. When a minor comes to the hospital without a parent or third party authorized to consent for the minor, staff should check to ensure that the minor is being admitted for either: an emergency condition; treatment for one of the medical conditions for which the minor can consent, or the minor has the authority to consent.
  7. When a minor has the legal right to consent to treatment, the minor also has a privacy right to the health information resulting from that treatment and is the person authorized to disclose that health information.