



CONSENT TO TREATMENT – Minor POLICY AND PROCEDURES

MSRDP Operating Procedure Number: MSRDP 2.009 see: Quality Management 01.003.61
Effective Date: April 2002, Revised May 14, 2004
Prepared By: MSRDP Administration and UNTHSC Quality Management
Purpose: To ensure medical treatment is not provided without proper consent. To elicit the parent/legal guardian in the treatment care plan.

Approval: _____
Chairman, MSRDP Board of Directors

1.0 **Policy.**

Prior to medical treatment of a minor the parent or legal guardian must give consent.

2.0 **Purpose.**

To ensure medical treatment is not provided without proper consent. To elicit the parent/legal guardian in the treatment care plan.

3.0 **Definitions.**

4.0 **Procedures.**

4.1 A parent or legal guardian will be provided the Consent to Treatment form to complete and sign.

4.2 The parent or legal guardian will be asked to sign the Consent to Treatment form before any treatment is performed. Any conflict(s) of signing the form shall be resolved before any treatment is performed. (Exception: Treatment may be rendered if the attending physician determines that withholding treatment would be life threatening.)

4.3 The signed Consent to treatment is to remain in the patients' medical record.

4.4 The Consent to Treatment does not take the place of an informed consent form (form needed to give consent for a special procedure or procedure that is considered high risk.)



4.5 Any questions or concerns regarding the Consent to Treatment of a minor should be forwarded to the Quality Management office and /or General Counsel.

5.0 **References**

6.0 **Follow-Up and Review**

Policy and form to be reviewed as needed or every three (3) years.

7.0 **Responsibility**

Senior Associate Dean and Chief Medical Officer
Vice president, Practice Operations and Chief Administrative Officer
Director of Quality Management
Senior Administration Official in each Patient Care Department