



Ambulatory Clinic Policy and Procedure

Title: CONSENT TO TREAT	Policy Number: EP 6.15
Regulation Reference: Texas Administrative Code, Title 25, Part 7	Effective Date: 07/2016

Policy Statement:

It is the policy of Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) to respect patient autonomy. Respect is evidenced through obtaining the patient’s written consent before initial examination or treatment is performed.

Scope and Distribution:

This policy applies and will be distributed to all TTUHSC El Paso ambulatory clinics.

Definitions:

1. “Consent” – Authorization for treatment or care given by the patient to a health care provider.
2. “Informed Consent” – Permission given by the patient to a health care provider to perform certain procedures, treatments or care after having been advised of the benefits, risks, side effects and alternative treatments or care that could influence a reasonable person in deciding whether to consent.

Procedure:

1. **Who May Consent:** See 6.15A, Consent for Treatment Guidelines, Who May Sign for Consent.
2. **Clinic Visits:**
 - a. The patient should sign form 6.15B, Consent to Treatment/Health Care Agreement (English) or 6.15B.1, Consent to Treatment/Health Care Agreement (Spanish) at the first clinic visit.
 - b. The signed form should be dated, witnessed and placed in the medical record.
 - c. If the patient refuses to sign the consent form, the Office of Professional Liability should be called. The patient should not be examined or treated until a consent form has been signed, with the exception of an emergency.
 - d. There may be some situations in which a minor requires immediate treatment but a parent or guardian cannot be located. Form 6.15C, Alternative Person’s Consent to Medical Treatment of a Minor, may be used or the same information documented in the medical record.
3. **Length of Time Consent is in Effect:** The Consent to Treatment/Health Care Agreement will be valid and remain in effect as long as the patient seeks health care in TTUHSC El Paso ambulatory clinics, unless revoked by the patient in writing with written notice provided to each clinic attended by the patient. Occasionally the form may be revised and will require a new signature.

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Version Number: 1	Revision Date:
Signatory approval on file by: Michael J. Romano, M.D. Associate Dean of Clinical Affairs Clinic Operations Committee, Chair Paul L. Foster School of Medicine	