



CORRECTIONS MEDICINE
Informed Consent
ACA Standard: 4 ALDF – 4D – 15

Effective: January 1996
Revised: June 2016, August 2019
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Policy Number:
CM – 66

- I. **PURPOSE:** To inform the patient of the recommended medical treatment as it relates to the patient’s medical condition.

- II. **POLICY:** Patients have the right of informed consent specific to the examination and treatment of their symptoms and diagnosis. The incarcerated individual is a patient of the Corrections Medicine practice and is encouraged to participate with full knowledge in the practice of his or her care.

- III. **RESPONSIBILITY:** All staff members working for the Corrections Medicine program are responsible for the content of and adherence to this policy and procedure.

- IV. **PROCEDURE:**
 - 1. On admission to the Buzz Westfall Justice Center each patient shall be asked to sign a general consent form for medical, dental and mental health treatment while incarcerated. The general consent for treatment also informs the patient that a refusal of care can be signed at any time, if the patient so desires to forego specific assessment, testing or treatment.

 - 2. Active acknowledgement and a clear understanding by the patient shall be solicited in a polite and professional manner without the use of convoluted medical jargon.

 - 3. If patient refuses to give general consent for treatment, a refusal form must be signed by the patient and witnessed by a member of the Corrections Medicine staff who shall also sign the form. The patient shall be informed that Corrections Medicine staff will not have their permission to provide treatment, including administration of medications, unless consent for treatment is signed.

 - 4. If the patient signs a refusal for all treatment, a medication administration record (MAR) shall be completed noting that the patient has refused all treatment. If the patient has any medical condition, a provider appointment shall be scheduled. At the appointment the provider will encourage the patient to sign the general consent form in order to provide the appropriate treatment.

 - 5. In the event of an emergency, all patients shall be treated whether or not consent for treatment has been signed, unless hospice care has been agreed upon and ordered by the provider.

 - 6. If a medical procedure is necessary, the provider shall give an explanation of the procedure, including the risks and benefits of receiving the treatment, and an explanation of the risks and benefits if the patient decides to forgo medical treatment. A separate consent is signed for any medical procedure performed.