PURPOSE

To insure proper treatment with minors in relationship to medical consent.

MISSION / VALUES RATIONALE

This policy is aligned with the Mission and Values for Amita Health. Our mission calls us to provide compassionate, holistic care with a spirit of healing and hope for all persons in the communities we serve. Our ministry is an enduring sign of our Core Values of HOPE, to instill us with integrity, inspire us to interconnect with each other, encourage us to honor diversity and dignity of each individual and empower us to always strive for exceptional performance to our patients/residents and to best serve those in need.

SPECIAL INSTRUCTIONS/FORMS TO BE USED

N/A

PROCEDURE

All minors treated by the Amita St. Mary’s Hospital EMS System prehospital providers will have an appropriate consent for treatment. (A minor is any male or female under the age of 18 years of age.) Prior to treating or transporting a minor, the prehospital provider shall:

I. Obtain verbal consent for treatment from a parent or legal guardian.

   A. If the patient is a minor who is a ward of the court, in a foster, home, etc., the representative of the agency must give consent.
   
   B. If parents are deceased, the legal guardian must give consent.
   
   C. If parents are divorced, the parent having legal custody must give consent.
   
   D. If parents are separated, the parent responsible for the care of the child must give consent.
   
   E. If parents have joint custody then either parent will have authority to consent.

II. Obtain consent from the patient if patient is an emancipated minor (specify reason on run sheet). Minor is emancipated if:
A. Living away from home, earning own livelihood, and retaining their earnings.
B. Active in armed services.
C. Married.
D. Pregnant and/or a parent.
E. Have court document which indicates emancipation

III. Obtain consent from minor if:
A. If the minor is at least 12 years of age and is requesting treatment for:
   1. Drug or alcohol abuse.
   2. HIV Testing
   3. Sexually transmitted disease
   4. Counseling for drug or alcohol abuse by family member.
B. Any minor may consent to treatment in the following situations:
   1. If an emergency or when the minor’s health could be adversely affected without prompt treatment.
   2. Counseling, diagnosis or treatment for any disease or injury resulting from sexual abuse or sexual assault.
   3. If married.
   4. If pregnant
   5. Minor parents for their children
   6. If they are emancipated

IV. If “immediate emergency treatment” is required and prompt consent by a parent or legal guardian cannot be obtained (ie. A babysitter only is present), then EMS personnel can provide needed treatment and transport under the “emergency” doctrine (provided for the patient who cannot act on his/her own the opportunity to obtain the treatment he/she logically would have accepted). Notify Presence St. Mary’s EMS System if unable to obtain consent for treatment. Document on run sheet that treatment was given without parental consent and document efforts made to obtain consent. At no time shall patient care be delayed or jeopardized by trying to obtain consent.

V. In the situation of a child requiring emergency treatment but the parents do not consent due to religious beliefs, then the EMT should contact the Resource Hospital. Advise the parents of the risks involved, obtain a signed release from the parent, and have other bystanders (police, EMS
personnel, etc.) witness the situation. In cases of required emergency treatment the EMT’s should notify the proper law enforcement agency or child welfare agency.

**Kevin Bernard**

Department Leader

**DATE:** 03/29/2019

**NOTE:** Policies with original signatures are on file in Administration.

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