



**MONTANA STATE HOSPITAL
POLICY AND PROCEDURE**

**PROCEDURE FOR OBTAINING INFORMED CONSENT
FOR MEDICAL & SURGICAL PROCEDURES**

Effective Date: June 19, 2020

Policy: PH-07

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- I. PURPOSE:** To ensure any patient receiving surgery, dental surgery, or invasive medical procedures will be fully informed as to all risks, benefits, and alternatives prior to giving consent.
- II. POLICY:**
- A. Patients undergoing any routine medical, dental or surgical procedures will be given full information as to the risks, benefits, and alternatives of the procedure by a person knowledgeable and experienced with the procedure. Appropriate informed consent will be obtained in all cases. If the patient is not competent to make such decisions, such information will be given to and consent obtained from the legally appointed guardian or Power of Attorney (POA) for Healthcare.
- B. In case of medical emergencies where time is of the essence in saving the patient's life or limb, exceptions to the above policy may be adjusted to meet the emergent needs of the patient and the acceptable standards of medical practice.
- III. DEFINITIONS:** None.
- IV. RESPONSIBILITIES:**
- A. For all procedures performed at Montana State Hospital (MSH);
1. The Medical Clinic Licensed Independent Practitioner or Dentist is responsible for ensuring a signed "Informed Consent for Medical/Surgical Procedures" form is in the patient's file prior to the beginning of the procedure.
 2. All other responsibilities are as per the procedure guidelines of the policy listed below.
- V. PROCEDURE:**
- A. All surgical, dental, or medical procedures involving risk to the patient will require a signed "Informed Consent For Medical/Surgical Procedures" form before the procedure is begun.
- B. All patients will be informed of the risks, benefits, and alternatives by the licensed independent practitioner/dentist performing the procedure or a qualified designee

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familiar and knowledgeable about the procedure. The patient or legal guardian after being informed may sign the form. The signed informed consent form will become a part of the patient's medical record.

- C. If the procedure is performed at MSH, the "Informed Consent For Medical/Surgical Procedures" form will be completed including:
1. The patient's name and number;
 2. The responsible party and their relationship to the patient;
 3. The procedure to be performed;
 4. The licensed independent practitioner or dentist who will perform the procedure;
 5. A statement as to the indication for the procedure.
- D. If the procedure is not performed at MSH, a form will be completed stating the patient's name and number, the responsible party, and their relationship to the patient, whether or not the patient is competent to make decisions regarding medical treatment. If the patient is not competent, the name of the guardian or POA for healthcare along with the guardian's/POA's address and phone number will be provided. MSH staff may assist by contacting the guardian/POA and preparing them for a phone call from the provider performing the procedure, and making certain the guardian/POA will be available at a specified time to expedite obtaining informed consent. The outside provider is responsible for obtaining a signed consent form for patients treated outside MSH.
- E. If the procedure involves contrast material injected into the patient's body, an additional informed consent for contrast material is required.

VI. REFERENCES: None.

VII. COLLABORATED WITH: Medical Staff and Medical Clinic.

VIII. RESCISSIONS: PH-07, Procedure for Obtaining Informed Consent for Medical dated April 21, 2016; PH-07, Procedure for Obtaining Informed Consent for Medical and Surgical Procedures dated February 14, 2009; PH-07, *Procedure for Obtaining Informed Consent for Medical and Surgical Procedures* dated August 22, 2006; PH-07, *Procedure for Obtaining Informed Consent for Medical and Surgical Procedures* dated March 31, 2003; PH-07, *Procedure for Obtaining Informed Consent for Medical and Surgical Procedures* dated February 14, 2000; HOPP PH-04-96-R, Procedure for Obtaining Informed Consent for Medical and Surgical Procedures, dated September 1996.

IX. DISTRIBUTION: All hospital policy manuals.

X. ANNUAL REVIEW AND AUTHORIZATION: This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.

XI. FOLLOW-UP RESPONSIBILITY: Medical Director.

XII. ATTACHMENTS: For internal use only.

- A. Informed Consent for Medical/Surgical Procedures Form
- B. Consent Information Form

Signatures:

Kyle Fouts
Hospital Administrator

Thomas Gray, MD
Medical Director