

8.2.1 CONSENTS

Policy: Title X clinics must document that all clients have a signed consent form in their medical record.

Procedure: Consent forms must be language appropriate (e.g. written in a language understood by the client or translated and witnessed by an interpreter).

Written general consent

Written general consent must include:

1. A statement indicating the client's voluntary acceptance of the clinic's services.
2. A statement that receipt of Title X family planning services is not a prerequisite to receive other services offered by the clinic.
3. Documentation of explanation of services. This should cover an explanation of the physical examination, any necessary clinical procedures, lab services and treatment to be performed.
4. A confidentiality assurance statement (see also MT TX FP Administrative Manual, Policy 2.3, *Client Confidentiality*, and Sample 9.11, *Sample Orientation Checklist and Acknowledgment Statement*).

Informed Consent

1. Documentation of informed consent must be included in the client's medical record for all clinical services.
2. Title X clients must understand the risk and benefits for clinical services provided.
3. Elements of full informed consent include:
 - a. The nature of the decision/procedure
 - b. Reasonable alternatives to the proposed intervention
 - c. The relevant risks, benefits, and uncertainties related to each alternative
 - d. Assessment of client understanding
 - e. The acceptance of the intervention by the client
4. Informed consent forms must be signed, witnessed and dated before the initiation of any clinical services and become a permanent part of the client's medical record.

Method Specific Consent

1. All clients must provide informed consent for contraceptive methods.
2. Documentation of counseling and informed consent must be included in the client's medical record. This may be done through a signed method specific consent form.
3. While a method specific consent form is not required, the service site must demonstrate that all required counseling is documented in the client's medical record.
4. This documentation must confirm that the client understands the contraceptive counseling and should follow the counseling techniques outlined in the Montana Title X Family Planning Administrative Manual, Section 8.7 *Contraceptive Services*. The WMHS may be contacted for sample client information sheets on contraceptive methods at 406-444-7331.

HIV Screening Consent

1. Montana state law on HIV screening states that screening for HIV-related conditions must be considered routine and must be incorporated into the client's general informed consent for medical care on the same basis as other screening and diagnostic tests (*MCA 50-16-1014*).
2. Screening for HIV-related conditions must be voluntary and undertaken with the client's knowledge and understanding that HIV diagnostic testing is planned.
3. Clients must be informed orally or in writing that HIV diagnostic testing will be performed.

4. If a client declines an HIV diagnostic test, this decision must be documented in the client's medical record.