

**CONNECTICUT VALLEY HOSPITAL
OPERATIONAL PROCEDURE MANUAL**

SECTION I:	PATIENT FOCUSED FUNCTIONS
CHAPTER 1:	Ethics, Rights and Responsibilities
PROCEDURE 1.4:	Informed Consent
REVISED:	11/24/06; 07/30/09; 3/14/15; 02/18
Governing Body Approval:	3/31/16; 04/18

PURPOSE: To ensure that each patient receives a thorough explanation prior to all treatment or therapeutic procedures and at appropriate times during the delivery of care. By providing information to the patients in their preferred language, the hospital affirms the rights of each patient to information which assists him/her in providing informed consent.

SCOPE: All clinical staff

PROCEDURE:

1. Informed consent is provided prior to the initiation of any proposed treatment or therapeutic procedure. The physician or primary treater provides a thorough explanation of the nature of the proposed treatment. This discussion should include the following:
 - a. potential benefits, risks and side effects;
 - b. potential problems related to recuperation;
 - c. the likelihood of success;
 - d. the possible results of non-treatment;
 - e. reasonable alternatives and associated potential benefits, risks, and side effects; and
 - f. when indicated, any limitations on the confidentiality of any information learned from or about the patient.
2. The physician or primary treater apprises the patient of the name and professional title of the treater who has the primary responsibility for the patient's care and those responsible for performing procedures or treatments.
3. The physician or primary treater documents his/her opinion of each patient's capacity and understanding of the proposed treatment or procedure and subsequent consent or refusal of consent in one or more of the following documents: the Master Treatment Plan, specific consent forms, Advance Directive; DNR consents, research protocols, as well as the progress notes. Ongoing determination of a patient's capacity to provide consent is made throughout the course of care.
4. The physician or primary treater understands that each patient has the right to refuse to consent to or participate in any treatment or procedure. A decision not to participate in a particular proposed treatment or procedure will not compromise the staff's attempts to continue to provide the best possible quality of care for the patient.
5. In the event that a patient, in the opinion of the attending psychiatrist, is mentally incapable or physically compromised and therefore unable to understand and/or exercise his/her right to

consent or refuse treatment, the Attending Psychiatrist petitions the Probate Court to evaluate competency of the patient, and to assign a conservator of person to act on his/her behalf. In the case of proposed treatment with psychotropic medications, please see [Operational Procedure 3.1 Emergency and Involuntary Medication](#).

6. The treating Physician, recognizing that complex legal, ethical, and/or social questions may arise in the care of patients, may seek consultation from the hospital's Ethics Committee. The committee provides a forum to discuss and assist with issues related to informed consent among other issues.