Changes to Consent Form
Information Bulletin

October 2013

When to use the new consent forms

In response to staff and physician input, the Consent to Specific Treatment/Procedure form (09741) in current use has been revised into three separate consent forms. In addition, a separate consent form for Blood Borne Virus testing when not associated with a specific procedural consent has also been developed in collaboration with Workplace Health and Safety. Outlined below is the description of when to use each form. Please note that the Consent to Treatment/Procedure(s) policy has not changed.

The new forms will go into effect Tuesday October 22, 2013.

Consent to Treatment Plan or Procedure (09741)

- Use this form for patients who are undergoing a specific treatment or procedure that is not surgical or invasive
- Provide an outline of the treatment in the Details of Treatment Plan or Procedure section of the consent including blood and blood products if applicable

Consent to Surgery or Invasive Procedure (18628)

- Use this form for patients who are undergoing surgical or invasive procedures including endoscopy or cardiac catheterization
- Complete the Blood or Blood Product Transfusion section as appropriate. If the patient has specific transfusion wishes they must be outlined in the Details of Surgery or Invasive Procedure section
- Following the informed consent process, have the person(s) providing consent sign the form, indicating their role
- Where appropriate and as per instructions on the form, cross out and initial any of the consent elements that the patient does not agree to, e.g. testing for blood borne viruses, retention of tissue, involvement of trainees

For more information please e-mail Clinical Policy at clinicalpolicy@albertahealthservices.ca. AHS Legal Services (Intake Line 1-888-943-0904), Office of the Public Guardian (Monday to Friday 1-877-427-4525) (After Hours Crisis Line: 1-866-262-9731).
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Emergency Health Care: Documentation of Exception to Consent (18629)

- Use this form to document the provision of emergency health care when it is not possible or practical to obtain informed consent
- Two health-care practitioners (at least one physician) must agree that emergency treatment is necessary to preserve life, prevent serious physical/mental harm or alleviate severe pain
- The patient must not have previously objected to the treatment while competent
- This consent is for emergency treatment only. If the condition changes and informed consent can be obtained, one of the other consent forms should be used
- The signature of the first physician is required; the second signature should be obtained when it is practical

Consent to Blood Testing for Blood Borne Viruses (18213)

- Use this form to gain consent for patients to provide blood samples for the purpose of testing for blood borne viruses in the instance of needle stick injuries or other blood or body fluid exposures
- If an alternate decision maker is used, his/her role should be noted
- A Blood Borne Virus Testing - Patient Information Sheet should be provided to the patient
- This consent can be acquired at the time of admission to areas where there would be some risk of needle stick injury or exposure to blood or body fluids, or at the time that exposure occurs
- Areas within Alberta Health Services will need to consider who will be accountable (Most Responsible Health Practitioner or primary nurse) to ensure that these forms are signed at the time of admission or when unexpected exposure occurs

Effective Tuesday October 22, 2013, please use the above listed forms. It is expected that with implementation of these revised forms, prior issues with the consent forms will largely be resolved and therefore the previously unused consent forms can be retired. Managers and supervisors should remove previously unused forms from units and clinical service areas.

Future development of additional forms or versions to manage new or unforeseen issues or changes to legislation or policy should be referred to the forms group or escalated through Clinical Policy to the appropriate leaders/owners for review.

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