

MedPeds Medical Clinic, PA

Consent to Treat Minor Patient Without Parent Present

In order for us to treat a minor without a parent/legal guardian present, please complete this form and return it with a copy of the parent's/guardian's driver's license to **MedPeds Medical Clinic, PA.**

I, _____ am the parent/legal guardian of
(Print name here)
 _____, currently a minor, whose date of birth is ____/____/____.
(Print name of minor)

I authorize the medical providers of **MedPeds Medical Clinic, PA** to provide medical care to my son/ daughter, including, but not limited to, diagnostic examinations (including laboratory testing), treatment procedures, and prescribing of medications as deemed appropriate by his/her provider.

I understand that, should my minor child need more invasive diagnostic or surgical procedures, attempts will be made to contact me before such care is initiated at the numbers I have provided.

This consent will remain in effect until the patient reaches the age of eighteen unless revoked in writing to MedPeds Medical Clinic, PA. I further understand that, once my child reaches the age of majority, my consent for treatment is no longer required.

I may be reached at the following numbers to speak to a provider if necessary or I have listed other adult family/contact numbers if I am unreachable. I give my consent to speak to the person(s) listed about my child's medical information/conditions.

Cell #	May we leave a message?	YES	NO
Work #	May we leave a message?	YES	NO
Home #	May we leave a message?	YES	NO

Name of Adult Contact for Emergencies	Relationship	Contact Number

Please make payment arrangements prior to your child's visit by calling the office at 817-596-3700 or send payment with your child. Credit card payments are accepted over the phone for your convenience.

By signing this, I acknowledge I have read and agree to this consent and that any questions I had prior to signing were answered by MedPeds Medical Clinic, PA.

Signature of Parent/Legal Guardian _____ Date _____