



## Consent for Medical Treatment of a Minor

Consent for medical treatment of children under the age of 18, when the medical treatment is not a medical emergency, requires the permission of a parent or legal guardian to receive medical care. When there is a joint custody arrangement, the court order outlining the joint custody arrangement, or a written agreement between the parties, will dictate who can give consent. When consent is required from both parents, consent is not present if one of the parents objects.

Any minor who is 18 years of age or older, or has graduated from high school, or has married, or has been pregnant, may give effective consent to medical, dental, and health services for himself or herself, and the consent of no other person shall be necessary.

Mental health care has separate requirements that are not a part of this policy.

I hereby provide consent to the Pediatric Therapy Center of Bucks County to treat the children listed below. I affirm that I am the parent or legal guardian of these children and that paragraph (2) above does not apply to this situation.

There  is  
 is not a custody agreement that pertains to the children listed below.

(1) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

(2) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

(3) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name and address of additional parent/guardian with legal custody:

\_\_\_\_\_  
\_\_\_\_\_

This applies to child (1)  child (2)  child (3)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (Printed): \_\_\_\_\_