INFORMED CONSENT: State law- residual clause; Patients who do not speak English – standards & policy; -Resolving conflicts of care- an approach.

1. State law requires that patients consent to surgical and medical treatment. When patients do not have the capacity to consent and have not executed a directive as to who can consent/ refuse recommended treatment LRS 40:1159.4 provides for persons (family members) other than the patient who may consent for the patient. The LA legislature amended this statute to add persons not related to the patient (adult friend) to consent to treatment for them. The amended statute which became effective August 1, 2014 is attached.\*

\*Adult friend applies to LRS 40:1159.4) It does not apply to who can make end of life declarations for a patient who lacks capacity.

1. Special consent law applies to consent for HIV testing LRS 40:1171.3
2. Sometimes a patient is unable to consent to treatment because he/ she speaks a language other than English or has limited English proficient (LEP). In 2010, The Joint Commission (TJC) created standards for communications with LEP patients. **This subject is addressed during the Surgery rotation, as topic “Communication”**
3. A team based approach is suggested to resolve conflicts in decision making which arise among providers & patients - Enterprise Risk Management approach to Critical patient Decision making- is attached
4. After you have reviewed these articles please complete the attached quiz.

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