

	Medical Consent Law	Time Limit / Revocation	Affidavit / Consent Form	Liability
AZ	<p>Ariz. Rev. Stat. Ann. § 8-514.05 (C) (2006): A relative or other person in whose care the child is currently placed may consent to the following: (a) Evaluation and treatment for emergency, non-life-threatening conditions; (b) Routine medical and dental treatment and procedures, including early periodic screening diagnosis and treatment services, and services by health care providers to relieve pain or treat symptoms of common childhood illnesses or conditions.</p> <p>However, such persons may NOT consent to the following: (a) General anesthesia; (b) Surgery; (c) Testing for HIV; (d) Blood transfusions; (e) Abortions</p> <p>Ariz. Rev. Stat. Ann. § 20-9-602 (2006): Any of the following persons is authorized and empowered to consent to any surgical or medical treatment or procedure: (5) Any person standing in <i>loco parentis</i>, whether formally serving or not; any guardian, conservator, or custodian, for his ward (8) Any adult sibling (9) Any maternal grandparent for a minor grandchild; if the father is authorized and empowered to consent, any paternal grandparent</p>	Not enumerated in statute	Oral consent allowed (specifically mentioned in Ariz. Rev. Stat. Ann. § 20-9-602 (2006) ; not specifically mentioned in Ariz. Rev. Stat. Ann. § 8-514.05 (2006)). No written consent form required.	Not enumerated in statute
AR	<p>A.C.A. § 20-9-602: Any person standing in <i>loco parentis</i>, whether formally serving or not, and any guardian, conservator, or custodian, may consent to any surgical or medical treatment or procedure not prohibited by law which may be suggested, recommended, prescribed, or directed by a licensed physician.</p> <p>During the absence of a parent so authorized and empowered, any maternal grandparent and, if the father is so authorized and empowered, any paternal grandparent, may provide medical consent for his minor grandchild.</p>	Not enumerated in statute	Oral consent allowed (A.C.A. § 20-9-602). No written consent form required.	Not enumerated in statute

<p>CA</p>	<p>Cal. [Prob.] Code § 2353 (2006): The guardian has the same right as a parent having legal custody of a child to give consent to medical treatment performed upon the ward and to require the ward to receive medical treatment.</p> <p>Cal. [Fam.] Code § 6550 (2006): (a) A relative caregiver who completes and signs the affidavit provided in Section 6552 shall have the same rights to authorize medical/dental care that are given to guardians under Section 2353 of the Probate Code. This includes mental health care. (b) The decision of a caregiver to consent to or to refuse medical or dental care for a minor shall be superseded by any contravening decision of the parent or other person having legal custody of the minor, provided the decision does not jeopardize the minor's life, health, or safety.</p> <p>Cal. [Fam.] Code § 6910 (2006): A guardian or relative caregiver who may authorize medical care and dental care for a minor under § 6550 may authorize in writing an adult into whose care a minor has been entrusted to consent to medical care or dental care, or both, for the minor.</p>	<p>Cal. [Fam.] Code § 6550(f) (2006): If the minor stops living with the caregiver, the caregiver shall notify any school, health care provider, or health care service plan that has been given the affidavit. The affidavit is invalid after the school, health care provider, or health care service plan receives notice that the minor is no longer living with the caregiver.</p>	<p>Oral consent not enumerated in statute. See Cal. [Fam.] Code § 6552 (2006): for complete written affidavit form.</p>	<p>CA FAM § 6550 (c): A person who acts in good faith reliance on a caregiver's authorization affidavit to provide medical or dental care, without actual knowledge of facts contrary to those stated on the affidavit, is not subject to civil or criminal liability or to professional disciplinary action.</p>
<p>CO</p>	<p>Colo. Rev. Stat. Ann. § 25-4-1704 (Child Immunization Program): Every parent, legal guardian, or person vested with legal custody or decision-making responsibility for the medical care of a minor, or person otherwise responsible for the care of an infant, shall be responsible for having such infant vaccinated in compliance with the schedule of immunization established by the board of health.</p> <p>A parent, legal guardian, person vested with legal custody of a minor or decision-making responsibility for the medical care of a minor, or such other adult person responsible for the care of a minor in this state, other than any employee of a licensed child care center in which the minor is enrolled, may delegate, verbally or in writing, that person's authority to consent to the immunization of a minor to a stepparent, an adult relative of first or second degree of kinship, or an adult child care provider who has care and control of the minor.</p>	<p>Not enumerated in statute</p>	<p>Oral consent allowed for vaccinations, but must be confirmed afterwards in writing (Colo. Rev. Stat. Ann.. § 25-4-1704)</p>	<p>Not enumerated in statute</p>

DE	<p>Del. Code Ann. tit. 13, § 707(b) (2006): Consent to any medical, surgical, dental, psychological or osteopathic procedure may be given by: (b5) Any person professing to be serving as temporary custodian of such minor at the request of a parent or guardian of such minor; provided, however, that the consent given shall be effective only after reasonable efforts shall have been made to obtain the consent of the parent or guardian of said minor; or (b6) A relative caregiver acting pursuant to an Affidavit of Establishment of Power to Relative Caregivers to Consent to Medical Treatment of Minors</p> <p>Del. Code Ann. tit. 13, § 708(d) (2006): The decision of a relative caregiver to consent to or to refuse medical treatment for a minor shall be superseded by a decision of a parent, legal custodian or guardian of the minor.</p>	<p>Del. Code Ann. tit.13, Del.C. § 708(b) (2006): The affidavit is valid for 1 year unless the minor no longer resides in the caregiver's home or a parent, custodian or guardian revokes his or her approval. The affidavit is invalid as soon as a parent, custodian or guardian revokes his or her approval. If this happens, the caregiver shall notify any health care provider or health service plans with which the minor has been involved through the caregiver.</p>	<p>Oral consent not enumerated in statute. See Del. Code Ann. tit. 13, § 708 (2006) for suggested format for written affidavit.</p>	<p>Del. Code Ann. tit. 13, § 707(e) (2006): No person who relies in good faith upon a fully executed Affidavit of Establishment of Power to Relative Caregivers to Consent to Medical Treatment of Minors in providing medical treatment shall be subject to criminal or civil liability or to professional disciplinary action because of the reliance.</p> <p>Del. Code Ann. tit. 13, § 707(g) (2006): A person who knowingly makes a false statement in an affidavit shall be subject to a civil penalty of \$1,000 per child.</p>
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DC	<p><i>D.C Code Ann. § 16-4901(a) (2006):</i> A parent, legal guardian, or legal custodian may authorize an adult person, in whose care a minor has been entrusted, to consent to any medical, surgical, dental, developmental screening and/or mental health examination or treatment, including immunization, to be rendered to the minor under the supervision or upon the advice of a physician, nurse, dentist or mental health professional licensed to practice in the District of Columbia, provided there is no prior order of any court in any jurisdiction currently in effect which would prohibit the parent, legal guardian, or legal custodian from exercising the power that they seek to convey to another person.</p>	<p><i>D.C Code Ann. § 16-4901(d) (2006):</i> A delegation of authority to consent is revocable at will, unless other terms are agreed to by the parent, legal guardian, or legal custodian and the person to whom authority is being conveyed. The parties may provide for terms in writing which would require the revocation of authority to be in writing, make revocation effective only when a specified time period has elapsed after notification of intent to revoke, or any other terms that the parties deem appropriate.</p>	<p>Oral consent not enumerated in statute. See <i>D.C Code Ann. § 16-4901 (2006):</i> for suggested format for written affidavit.</p>	<p><i>D.C Code Ann. § 16-4901(e) (2006):</i> A physician, surgeon, nurse, mental health professional, dentist, or other health care professional, or a hospital or medical facility, that relies on a written instrument that is consistent with the requirements of subsection (b) of this section which authorizes another adult to consent to medical treatment of the executor's minor child or ward shall not incur civil liability for treating a minor without legal consent if a reasonable and prudent health care professional would have relied on the written instrument under the same or similar circumstances.</p>
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<p>FL</p>	<p>Fl. Stat. Ann. § 743.0645 (2006): Any of the following persons, in order of priority listed, may consent to the medical care or treatment of a minor who is not committed to the Department of Children and Family Services or the Department of Juvenile Justice or in their custody; or whenafter a reasonable attempt, a person who has the power to consent as otherwise provided by law cannot be contacted by the treatment provider and actual notice to the contrary has not been given to the provider by that person: (a) A person who possesses a power of attorney to provide medical consent for the minor (b) The stepparent (c) The grandparent (d) An adult brother or sister (e) An adult aunt or uncle</p>	<p>Not enumerated in statute</p>	<p>Oral consent not enumerated in statute. No written consent form required.</p>	<p>Fl. Stat. Ann. § 743.0645 (2006): The person who gives consent shall not incur civil liability by reason of the giving of consent, examination, or rendering of treatment, provided that such consent, examination, or treatment was given or rendered as a reasonable prudent person or similar health care professional would give or render it under the same or similar circumstances</p>
<p>GA</p>	<p>GA Code Ann. § 31-9-2 (2006); A guardian or any person temporarily standing in <i>loco parentis</i>, whether formally serving or not, may consent to medical or surgical treatment for the minor under his care.</p>	<p>Not enumerated in statute</p>	<p>Oral consent allowed (GA Code Ann. § 31-9-2 (2006)). No written consent form required.</p>	<p>Not enumerated in statute</p>

HI	<p>Haw. Rev. Stat. Ann. § 577-28 (2006): (a) A caregiver who possesses and presents a notarized affidavit of caregiver consent for a minor's health care may consent on behalf of a minor to primary and preventive medical and dental care and diagnostic testing, and other medically necessary health care and treatment.</p> <p>(g) For purposes of medical consent, "caregiver" is defined as any person related by blood, marriage, or adoption to the minor, including a person who is entitled to an award of custody pursuant to section 571-46 (2), but who is not the legal custodian or guardian of the minor; or any person who has resided with the minor continuously during the immediately preceding period of six months or more.</p>	<p>Haw. Rev. Stat. Ann. § 577-28 (2006): The minor's parent or legal custodian may at any time rescind this affidavit of caregiver consent for a minor's health care by providing written notification of the rescission to the appropriate health care professional.</p> <p>The affidavit of caregiver consent for a minor's health care shall be superseded by written notification from the minor's parent, guardian, or legal custodian to the health care professionals providing services to the minor that the affidavit has been rescinded.</p>	<p>Oral consent not enumerated in statute. See Haw. Rev. Stat. Ann. § 577-28(b) (2006): for suggested format for written affidavit.</p>	<p>Haw. Rev. Stat. Ann. § 577-28 (2006): A person who relies in good faith on this affidavit of caregiver consent for a minor's health care has no obligation to conduct any further inquiry or investigation and shall not be subject to civil or criminal liability or to professional disciplinary action because of that reliance.</p>
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<p>ID</p>	<p>Idaho Code Ann. § 39-4503 (2006): Consent for the furnishing of hospital, medical, dental or surgical care, treatment or procedures to any person who is not then capable of giving such consent or who is a minor or incompetent person, may be given or refused in the following order of priority:</p> <ul style="list-style-type: none"> (a) The legal guardian (b) The person named in a "Living Will and Durable Power of Attorney for Health Care" (c) If married, the spouse of such person; (d) A parent of such person; (e) Any relative representing himself or herself to be an appropriate, responsible person to act under the circumstances; (f) Any other competent individual representing himself or herself to be responsible for the health care of such person; or (g) If the subject person presents a medical emergency or there is a substantial likelihood of his or her life or health being seriously endangered by withholding or delay in the rendering of care to such patient, the attending physician or dentist may authorize and/or provide such care, treatment or procedure as he or she deems appropriate. 	<p>Idaho Code Ann. § 15-5-104 (2006): A parent or guardian may delegate medical consent to another person for a period not exceeding six months, or in the case of military personnel serving beyond the territorial limits of the United States, for a period not exceeding twelve months. The delegation for a minor to a grandparent of the minor, or to a sibling of the minor, or to a sibling of either parent of the minor, shall continue in effect until the time period, date, or condition set forth in the power of attorney (or if not provided, for three years). The power may be revoked prior to the expiration of the three year period by the parent or guardian.</p>	<p>Not written consent form required. Oral consent not enumerated in statute.</p>	<p>Idaho Code Ann. § 39-4503 (2006): No person who, in good faith, gives consent or authorization for the provision of hospital, medical, dental or surgical care, treatment or procedures to another shall be subject to civil liability.</p> <p>No physician, dentist, hospital or other duly authorized person who in good faith obtains consent shall be subject to civil liability.</p>
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IN	<p>Ind. Code Ann. § 16-36-1-5(b) (2006): Consent to health care for a minor not authorized to consent for him or herself may be given by any of the following:</p> <p>(1) A judicially appointed guardian</p> <p>(2) A parent or an individual in <i>loco parentis</i> if there is no guardian or other representative, the guardian or other representative is not reasonably available or declines to act, or the existence of the guardian or other representative is unknown to the health care provider.</p> <p>(3) An adult sibling of the minor if there is no guardian or other representative, a parent or an individual in <i>loco parentis</i> is not reasonably available or declines to act, or the existence of the parent or individual in <i>loco parentis</i> is unknown to the health care provider.</p>	<p>Ind.Code Ann. § 16-36-1-6© (2006): The delegate may revoke the delegation at any time by notifying orally or in writing the delegate or the health care provider</p>	<p>Oral consent not allowed Ind. Code Ann. § 16-36-1-6 6-1-4(1) (2006): The delegation of authority must be in writing; must be signed by the delegate; must be witnessed by an adult; and may specify conditions on the authority delegated.</p> <p>But see Ind. Code Ann. § 16-36-1-6 (2006), which states that revocation may be done orally.</p>	<p>Ind. Code Ann. § 16-36-1-10 (2006): (a) A health care provider acting or declining to act in reliance on the consent or refusal of consent of an individual who the provider believes in good faith is authorized to consent to health care is not subject to criminal prosecution, civil liability, or professional disciplinary action, on the ground that the individual who consented or refused to consent lacked authority or capacity.</p>
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<p>KS</p>	<p>Kan. Stat. Ann. § 38-136 (2006) (regarding immunization): (a) A parent may delegate in writing his or her authority to consent to the immunization of a minor to a grandparent by birth or adoption; an adult brother or sister or half brother or half sister, by birth or adoption; an adult aunt or uncle by birth or adoption; a stepparent; or another adult who has care and control of the minor. (b) A grandparent, brother or sister, aunt or uncle or stepparent of a minor who is the primary caregiver of a minor and who may consent to the immunization of the minor may delegate in writing the authority to consent to immunization of the minor to another person listed in subsection (a).</p> <p>Kan. Stat. Ann. § 38-137 (2006): (a) The following individuals may consent to the immunization of a minor if a parent is not reasonably available and the authority to consent is not denied under subsection (b): (1) A grandparent by birth or adoption; (2) an adult brother or sister or half brother or half sister, by birth or adoption; (3) an adult aunt or uncle by birth or adoption; (4) a stepparent; or (5) another adult who has care and control of the minor. (b) A person may <u>not</u> consent to the immunization of a minor if: (1) The parent expressly refused to delegate consent (2) The parent withdrew consent</p>	<p>Not enumerated in statute</p>	<p>No written consent form required. Oral consent not enumerated in statute.</p>	<p>Kan. Stat. Ann. § 38-139 (2006): (b) In the absence of willful misconduct or gross negligence, a health care provider who relies on the consent of a person delegated the authority to consent to the immunization of a minor shall not be liable for damages arising from reliance on such consent. (c) Except for acts of willful misconduct or gross negligence, a person who consents to the immunization of a minor shall not be liable for damages arising from any such immunization administered by a person authorized by law to administer immunizations.</p>
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<p style="text-align: center;">LA</p>	<p>La. Rev. Stat. Ann. § 9:975(A) (2006): (1) A non-legal custodian, who is not a foster parent caring for a child in the custody of the Office of Community Services, shall be authorized to give legal consent for a child in his care to receive any medical services for which parental consent is usually required (2) The decision of a non-legal custodian to consent to or to refuse medical services for a child in his custody shall be superseded by any contravening decision of a parent or a person having legal custody of the child, provided the decision of the legal custodian does not jeopardize the life, health, safety, or welfare of the child.</p> <p>La. Rev. Stat. Ann. § 40:1299.53 (2006): If there is no person who is reasonably available, willing, and competent to act, siblings and any person temporarily standing in <i>loco parentis</i> (whether formally serving or not), and any guardians, are authorized and empowered to consent (written or orally) to any surgical or medical treatment and procedures.</p>	<p>La. Rev. Stat. Ann. § 9:975 (2006): The affidavit shall not be valid for more than one year after the date on which it is executed.</p>	<p>See La. Rev. Stat. Ann. § 9:975 (2006) for suggested affidavit form. Note that oral consent is also allowed (La. Rev. Stat. Ann. § 40:1299.53 (2006))</p>	<p>La. Rev. Stat. Ann. § 9:975B (2006): No person who acts in good faith reliance on a properly executed affidavit, having no actual knowledge of any facts contrary to those stated in the affidavit, shall be subject to civil liability or criminal prosecution, or to professional disciplinary procedure, for any action which would have been proper if the facts had been as he believed them to be. This immunity shall apply even if medical services are rendered to a child in contravention of the wishes of the parent or legal custodian of that child. However, the person rendering the services must not have actual knowledge of the wishes of the parent or legal custodian.</p>
<p style="text-align: center;">MD</p>	<p>Md. Code Ann. [Health-Gen.] § 20-105(b) (2006): A relative providing informal kinship care for a child may consent to health care on behalf of the child if: a court has not appointed a guardian for the child or awarded custody of the child to an individual other than the relative providing informal kinship care; and the relative verifies the informal kinship care relationship through a sworn affidavit filed with the Department of Human Resources, Social Services Administration.</p>	<p>Md. Code Ann. [Health-Gen.] § 20-105(g) (2006): The relative providing informal kinship care shall file an affidavit annually for each year the child continues to live with the relative because of a serious family hardship.</p>	<p>Oral consent not enumerated in statute. See Md. Code Ann. [Health-Gen.] § 20-105 (2006) for suggested written affidavit form.</p>	<p>Not enumerated in statute</p>

<p>MS</p>	<p>Miss. Code Ann. § 41-41-3 (2006): (1) Any one of the following persons who is reasonably available, in descending order of priority, is authorized and empowered to consent on behalf of an unemancipated minor, either orally or otherwise, to any surgical or medical treatment or procedures not prohibited by law which may be suggested, recommended, prescribed or directed by a duly licensed physician: (a) The minor's guardian or custodian (b) The minor's parent (c) An adult brother or sister of the minor (d) The minor's grandparent</p> <p>(2) If none of the aforementioned individuals is reasonably available, an adult who has exhibited special care and concern for the minor and who is reasonably available may act; the adult shall communicate the assumption of authority as promptly as practicable to the individuals specified in subsection (1) who can be readily contacted.</p>	<p>Not enumerated in statute</p>	<p>Oral consent allowed (Miss. Code Ann. § 41-41-3 (2006)). No written consent form required.</p>	<p>Not enumerated in statute</p>
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<p>MO</p>	<p>Mo. Ann. Stat. § 431.058 (2006) (regarding immunizations): (2) A parent may delegate in writing his or her authority to consent to the immunization of a child. (3) Any adult may consent to the immunization of a child if a parent is not reasonably available. (7) A grandparent, brother or sister, aunt or uncle or stepparent of a child who is the primary caregiver of a child and who may consent to the immunization of the child may delegate in writing the authority to consent to immunization of the child to another adult.</p> <p>Mo. Ann. Stat. § 431.061 (2006) (regarding medical consent): Any of the following persons is authorized and empowered to consent, either orally or otherwise, to any surgical, medical, or other treatment: (5) Any adult standing in <i>loco parentis</i>, whether serving formally or not, for his minor charge in case of emergency; (6) Any guardian of the person for his ward; (7) During the absence of a parent, any adult for his minor brother or sister; (8) During the absence of a parent, any grandparent for his minor grandchild.</p>	<p>Not enumerated in statute</p>	<p>Oral consent allowed (Mo. Ann. Stat. § 431.061 (2006)). No written consent form required.</p>	<p>Mo. Ann. Stat. § 431.058(11) (2006): Except for acts of willful misconduct or gross negligence, a person who consents to the immunization of a child shall not be liable for damages arising from any such immunization.</p> <p>Mo. Ann. Stat. § 431.061(5) (2006): Any person acting in good faith and not having been put on notice to the contrary shall be justified in relying on the representations of any person purporting to give such consent, including, but not limited to, his identity, his age, his marital status, and his relationship to any other person for whom the consent is purportedly given.</p>
<p>NV</p>	<p>Nev. Rev. Stat. Ann. § 129.040 (2006): In emergency situations in which a minor is in need of immediate hospitalization, medical attention, or surgery and, after reasonable efforts made under the circumstances, the parents of such minor cannot be located for the purpose of consenting thereto, consent for such emergency attention may be given by any person standing in <i>loco parentis</i> to such minor.</p>	<p>Not enumerated in statute</p>	<p>No written consent form required. Oral consent not enumerated in statute.</p>	<p>Not enumerated in statute</p>

NM	<p>N.M. Stat. Ann. § 24-10-2 (2006): Consent to emergency medical procedures may be given by any person standing in <i>loco parentis</i> to the minor after reasonable efforts have been made to locate the minor's parents for purposes of consent.</p> <p>N.M. Stat. Ann. § 40-10B-15 (2006): (b) A caregiver who is a relative of the child, who executes a caregiver's authorization affidavit and who subscribes and swears to the affidavit before a notary public, has the same authority to authorize medical care, dental care and mental health care for the child as a guardian appointed pursuant to the Kinship Guardianship Act. (d) The decision of a caregiver to consent to or refuse medical, dental or mental health care pursuant to a caregiver's authorization affidavit is superseded by a contravening decision of a parent or other person having legal custody of the child if the contravening decision does not jeopardize the life, health or safety of the child.</p>	<p>N.M. Stat. Ann. § 40-10B-15 (2006): A caregiver's authorization affidavit executed pursuant to this section is not valid for more than one year after the date of its execution.</p>	<p>See N.M. Stat. Ann. § 40-10B-15(J) (2006) for affidavit proper form. Oral consent not enumerated in statute.</p>	<p>N.M. Stat. Ann. § 40-10B-15 (2006): (E) No person who acts in good faith reliance on a caregiver's authorization affidavit to provide medical, dental or mental health care to a child without actual knowledge of facts contrary to those stated in the affidavit is subject to criminal culpability, civil liability or professional disciplinary action. The foregoing exclusions apply even though a parent having parental rights or person having legal custody of the child has contrary wishes as long as the provider of the care has no actual knowledge of the contrary wishes. (F) A person who relies upon a caregiver's authorization affidavit is under no duty to make further inquiry or investigation.</p>
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<p>NY</p>	<p>N.Y. [Pub. Health] § 2504 (2006): Any person in a parental relation to a child; a grandparent, an adult brother or sister, an adult aunt or uncle, who has assumed care of the child; and an adult who has care of the child and has written authorization to consent from a person in a parental relation to a child may give effective consent for the immunization of a child. However, a person other than one in a parental relation to the child shall not give consent if he or she has reason to believe that a person in parental relation to the child objects to the immunization.</p> <p>Medical, dental, health, and hospital services may be rendered without consent when a child is in need of emergency attention and a delay due to obtaining consent would result in detriment to the child's life, health, or safety.</p>	<p>Not enumerated in statute</p>	<p>No written consent form required. Oral consent not enumerated in statute.</p>	<p>Not enumerated in statute</p>
<p>NC</p>	<p>N.C. Gen. Stat. Ann. § 32A-30 (2006): Any custodial parent having understanding and capacity to make and communicate health care decisions who is 18 years of age or older or who is emancipated may make an authorization to consent to health care for his or her minor child.</p> <p>N.C. Gen. Stat. Ann. § 32A-31 (2006): (a) A custodial parent of a minor child, pursuant to an authorization to consent to health care for minor, may grant an agent full power and authority to consent to and authorize health care for the minor. (b) An authorization to consent to health care for minor may contain, and the authority of the agent designated shall be subject to, any specific limitations or restrictions as the custodial parent deems appropriate. (c) A custodial parent may not, pursuant to an authorization to consent to health care for minor, authorize an agent to consent to the withholding or withdrawal of life sustaining procedures.</p>	<p>N.C. Gen. Stat. Ann. § 32A-32 (2006): If the authorization to consent to health care specifies a date after which it shall not be effective, the authorization shall be automatically revoked upon such date or as soon as the minor turns 18 or is emancipated. An authorization to consent to health care may be revoked at any time by the custodial parent.</p>	<p>See N.C. Gen. Stat. Ann. § 32A-34 (2006) for Authorization to Consent to Health Care for Minor form. Oral consent not enumerated in statute.</p>	<p>N.C. Gen. Stat. Ann. § 32A-33(b) (2006): Any physician, dentist, or other health care provider relying in good faith on the authority of an agent authorized to consent to health care for a minor child shall be protected to the full extent of the power conferred upon the agent, and no person so relying on the authority of the agent shall be liable, by reason of reliance, for actions taken pursuant to a consent of the agent.</p>

<p>ND</p>	<p><i>N.D. Cent. Code § 23-12-13 (2006):</i> After reasonable efforts to locate and secure health care authorization from the minor's parents, the following persons in order of priority may provide informed consent to health care (NOTE: A person may not provide informed consent to health care if a person of higher priority on this list has refused to do so): (b) An appointed guardian or custodian (f) Adult brothers and sisters (g) Grandparents of the patient (i) A close relative or friend of the patient who is at least eighteen years of age</p> <p>**NOTE: a, c, d, e, h have been omitted as they do not pertain to kinship caregiving. Siblings, grandparents, and close relatives and friends must all have maintained a close relationship with the minor in order to provide medical consent.</p> <p>No person authorized to provide informed consent pursuant to this section may provide consent for sterilization, abortion, or psychosurgery or for admission to a state mental health facility for a period of more than forty-five days without a mental health proceeding or other court order.</p>	<p>Not enumerated in statute</p>	<p>No written consent form required. Oral consent not enumerated in statute.</p>	<p>Not enumerated in statute</p>
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<p style="text-align: center; font-weight: bold; font-size: 24pt;">OH</p>	<p>Ohio Rev. Code Ann. § 3109.69 (2006): Once a caretaker authorization affidavit has been executed, the grandparent may exercise care, physical custody, and control of the child, including consenting to medical, psychological, or dental treatment for the child. The affidavit does not affect the rights and responsibilities of the parent, guardian, or custodian regarding the child, does not grant legal custody to the grandparent, and does not grant authority to the grandparent to consent to the marriage or adoption of the child.</p>	<p>Ohio Rev. Code Ann. § 3109.70 (2006): A caretaker authorization affidavit shall terminate on the occurrence of whichever of the following comes first: (A) One year elapses; (B) Child ceases to reside with the grandparent; (C) Parent, guardian, or custodian of the child acts to negate, reverse, or otherwise disapprove an action or decision of the grandparent who signed the affidavit; (D) Affidavit terminated by court order; (E) Death of the child; or (F) Death of the grandparent.</p>	<p>See Ohio Rev. Code Ann. § 3109.66 (2006) for suggested caretaker authorization affidavit format. Note that a grandparent may execute a caretaker authorization affidavit without attempting to locate the child's parent in the following circumstances: (1) If paternity has not been established with regard to the child, the child's father. (2) If the child is the subject of a custody order, the following parent: (a) A parent who is prohibited from receiving a notice of relocation (b) A parent whose parental rights have been terminated by order of a juvenile court</p>	<p>Ohio Rev. Code Ann. § 3109.73 (2006): Aside from wanton, reckless, or inconsistent medical care, any medical, psychological, or dental treatment provided to a child in reliance on an affidavit with respect to the child shall be considered to have been provided in good faith if the the person providing the treatment had no actual knowledge of opposition by the parent, guardian, or custodian.</p>
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OK	<p>Okla. Stat. Ann. tit. 10 § 21.6 (2006): (A) Any relative related within the third degree who has permanent care and custody of a child shall have full rights to authorize medical and dental care. The relative caregiver's authorization affidavit is permitted but not required in this situation.</p> <p>(B1) During the period of time after a child has been willfully left in the custody of a relative related to the child within the third degree, but prior to the time a child is deemed abandoned, a relative shall have full rights to authorize medical and dental care if:</p> <ol style="list-style-type: none"> a. the relative completes the relative caregiver's authorization affidavit b. the child is residing full-time with the relative and the relative contributes the major degree of support for the child, and c. the parents have expressed a willful intent by words, actions or omissions not to return for the child, and the relative is unable to contact the parent, or the parent refuses to regain physical custody of the child after a written request to do so. <p>(B2) The decision of a relative to consent to or refuse medical care shall be sup</p>	<p>Okla. Stat. Ann. tit. 10 § 21.6 (2006): The affidavit completed pursuant to this subsection shall not be valid for more than one year after the date on which it is executed unless the relative has legal custody.</p>	<p>Written affidavit required (Okla. Stat. Ann. tit. 10 § 21.6 (2006)). Oral consent note enumerated in statute.</p>	<p>Okla. Stat. Ann. tit. 10 § 21.6 (2006): No person who acts in good faith reliance upon a caregiver's properly completed authorization affidavit, without actual knowledge of facts contrary to those stated on the affidavit, shall be subject to criminal liability, civil liability to any person, or subject to professional disciplinary action for relying upon the affidavit to provide care. Any person who willfully makes a statement in the relative caregiver's authorization affidavit which the person knows to be false shall, upon conviction, be guilty of a misdemeanor punishable by imprisonment in the county jail for not more than one year or a fine of not more than \$500 or both.</p>
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<p>PA</p>	<p>11 Pa. Code § 2513(a) (2006): A parent, legal guardian or legal custodian of a minor may confer upon an adult person who is a relative or family friend the power to consent to medical, surgical, dental, developmental, mental health or other treatment to be rendered to the minor under the supervision of or upon the advice of a physician, nurse, school nurse, dentist, mental health or other licensed health care professional and to exercise any existing parental rights to obtain records and information with regard to the health care services and insurance unless the minor is in the custody of a county child and youth agency or there is currently in effect a prior order of a court in any jurisdiction which would prohibit the parent, legal guardian or legal custodian from exercising the power that the parent, legal guardian or legal custodian seeks to confer. When a parent's rights have not been terminated or voluntarily relinquished, nothing shall divest a parent of the power to consent to his children's medical or mental health treatment.</p>	<p>11 Pa. Code § 2512 (e) (2006): Parents can revoke the power of consent at any time by notifying all parties of interest in writing.</p> <p>Note that parents, caregivers, health care and insurance providers can put a time limit on the delegation of consent; however, this is not required by law (see http://www.seniorlawcenter.org/legalissues/li16.shtml).</p>	<p>Oral consent not enumerated in statute. See 11 Pa. Code § 2513(c) (2006) for suggested medical consent authorization form.</p>	<p>11 Pa. Code § 2512(f) (2006); A person, contractholder, group health care provider, mental health care provider, health care facility, mental health care facility and insurer who acts in good faith reliance on medical consent authorization shall not incur civil or criminal liability or be subject to professional disciplinary action for treating a minor without legal consent.</p>
<p>TX</p>	<p>Tex. [Fam.] Code Ann. § 32.001(a) (2006): The following persons may consent to medical, dental, psychological, and surgical treatment of a child when the person having the right to consent cannot be contacted and that person has not given actual notice to the contrary: (1) a grandparent; (2) an adult brother or sister; (3) an adult aunt or uncle; (5) an adult who has actual care, control, and possession of the child and has written authorization to consent</p> <p>Tex. [Fam.] Code Ann. § 32.101 (2006) (regarding immunizations): (a) The following persons may consent to the immunization of a child: (1) a parent guardian of the child; and (2) a person authorized under the law of another state or a court order to consent for the child. If these persons are not available, consent may be given by: (b1) a grandparent; (b2) an adult brother or sister; (b3) an adult aunt or uncle; (b4) a stepparent; (b6) another adult who has actual care, control, and possession of the child and has written authorization to consent; (b9) an adult having primary caregiving responsibilities for the child.</p>	<p>Not enumerated in statute</p>	<p>Tex. [Fam.] Code Ann. § 32.002 (2006): (a) Consent to medical treatment must be in writing, signed by the person giving consent, and given to the doctor, hospital, or other medical facility that administers the treatment.</p>	<p>Tex. [Fam.] Code Ann. § 32.001(d) (2006): A person who consents to the medical treatment of a minor is immune from liability for damages resulting from the examination or treatment of the minor, except to the extent of the person's own acts of negligence.</p>

<p>UT</p>	<p>Utah Code Ann. § 78-14-5(4) (2006): The following persons are authorized and empowered to consent to any non-prohibited health care: (c) Any person temporarily standing in <i>loco parentis</i>, whether formally serving or not, for the minor under his care and any guardian for his ward; (g) In the absence of a parent, any adult for his minor sibling (h) In the absence of a parent, any grandparent</p>	<p>Not enumerated in statute</p>	<p>No written consent form required. Oral consent not enumerated in statute.</p>	<p>Utah Code Ann. § 78-14-5(5) (2006): No person who in good faith consents or authorizes health care treatment or procedures for another as provided by this act shall be subject to civil liability.</p>
<p>VA</p>	<p>Va. Code Ann. § 54.1-2969 (2006): Whenever any minor who has been separated from the custody of his parent or guardian is in need of surgical or medical treatment, authority commensurate with that of a parent in like cases is conferred, for the purpose of giving consent to such surgical or medical treatment, to any person standing in <i>loco parentis</i>, or upon a conservator or custodian for his ward or other charge under disability.</p>	<p>Not enumerated in statute</p>	<p>No written consent form required. Oral consent not enumerated in statute.</p>	<p>Va. Code Ann. § 54.1-2969 (2006): Whenever delay in providing medical or surgical treatment to a minor may adversely affect such minor's recovery and no person authorized in this section to consent to such treatment for such minor is available within a reasonable time under the circumstances, no liability shall be imposed upon qualified emergency medical services personnel as defined in § 32.1-111.1 at the scene of an accident, fire or other emergency, a licensed health professional, or a licensed hospital by reason of lack of consent to such medical or surgical treatment.</p>

<p>WA</p>	<p>Wash. Rev. Code Ann. § 7.70.065 (2006): (2) Informed consent for health care, including mental health care, for a minor patient may be obtained from the following in order of priority: (i) The appointed guardian or legal custodian (iv) The individual, if any, to whom the minor's parent has given a signed authorization to make health care decisions (v) A competent adult representing himself or herself to be a relative responsible for the health care of such minor patient or a competent adult who has signed and dated a declaration under penalty of perjury stating that the adult person is a relative responsible for the health care of the minor patient.</p>	<p>Wash. Rev. Code Ann. §7.70.065 (2006): A declaration stating that an adult person is a relative responsible for the health care of the minor patient shall be effective for up to six months from the date of the declaration.</p>	<p>Written declaration stating that an adult person is a relative responsible for the health care of the minor patient is required (WA ST 7.70.065A), but a health care provider is not required to rely on such documentation before rendering care (WA ST 7.70.065).</p> <p>Note that oral consent is allowed (Wash. Rev. Code Ann. § 7.70.065A (2006))</p>	<p>Wash. Rev. Code Ann. § WA ST 7.70.065 (2006): A health care provider may, but is not required to, rely on the representations or declaration of a person claiming to be a relative responsible for the care of the minor patient if the health care provider does not have actual notice of the falsity of any of the statements made by the person claiming to be a relative responsible for the health care of the minor patient. A health care facility or a health care provider may, in its discretion, require documentation of a person's claimed status as being a relative responsible for the health care of the minor patient. However, there is no obligation to require such documentation.</p>
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WY	<p>Wyo. Stat. Ann. § 3-2-302 (2006): (a) A caregiver of a child may petition for appointment as a temporary guardian of a child for educational, medical care and dental care purposes. The petition shall be verified by affidavit</p> <p>(b) A temporary guardian for educational, medical care and dental care purposes may be appointed through an ex parte temporary guardianship order without notice to the child's natural parents if the court finds by a preponderance of the evidence from the petition and testimony, if any testimony is deemed necessary by the court, that temporary guardianship is in the best interest of the child and not detrimental to the interests of any other person and that no other person appears to have authority and willingness to act in the circumstances. The court shall cause the ex parte temporary guardianship order, together with notice of right to a hearing, to be served on the natural parents of the child pursuant to Rule 4 of the Wyoming Rules of Civil Procedure.</p>	<p>Wyo. Stat. Ann. § 3-2-302(d) (2006): Except upon a showing of good cause, an ex parte order appointing a temporary guardian of a child for educational, medical care and dental care purposes shall be limited to not more than one year.</p>	<p>See Wyo. Stat. Ann. § 3-2-302 (2006) for suggested written affidavit form.</p>	<p>Not enumerated in statute</p>
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