

Ardmore Enterprises, Inc.

EXPLANATION OF NEED FOR SURROGATE DECISION MAKER

Healthcare providers are required to obtain informed consent from an individual before certain invasive procedures like surgery or some diagnostic tests (i.e., colonoscopy) are initiated, and before implementation of certain psychotropic medication orders. Informed consent can only be obtained from an individual whom the healthcare provider deems competent. This determination is made solely at the discretion of the medical professional and is not influenced by whether or not an individual is his/her own guardian.

As residential service provider for _____, we must secure authorization from a surrogate decision maker before certain invasive medical services can be obtained. Please indicate by signing below, your willingness to provide needed consent for medical care in situations where _____'s consent is not accepted by a healthcare provider. If such a situation arises, you will be contacted by Ardmore staff. Thank you for your assistance.

Name of Individual: _____ Signature: _____

Name of Surrogate Decision Maker: _____

Signature: _____ Date Signed: _____

Relationship to Individual: _____ Length of Time Known: _____

Address: _____

Contact Numbers: Home: _____

Work: _____

Cell: _____

Other: _____