


Name of Policy: <u>Informed Consent for Psychoactive Medications</u> Policy Number: 3364-120-51 Department: Nursing Service Approving Officer: Chief Nursing Officer (CNO) and Medical Director Responsible Agent: Administrative Director Scope: The University of Toledo Medical Center	 Effective Date: 7/12/2022 Initial Effective Date: 6/1/14				
<table> <tr> <td><input type="checkbox"/> New policy proposal</td> <td><input checked="" type="checkbox"/> Minor/technical revision of existing policy</td> </tr> <tr> <td><input type="checkbox"/> Major revision of existing policy</td> <td><input type="checkbox"/> Reaffirmation of existing policy</td> </tr> </table>		<input type="checkbox"/> New policy proposal	<input checked="" type="checkbox"/> Minor/technical revision of existing policy	<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy
<input type="checkbox"/> New policy proposal	<input checked="" type="checkbox"/> Minor/technical revision of existing policy				
<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy				

(A) Policy Statement

Inpatient Behavioral Health will follow the medication practices of UTMC.

(B) Purpose of Policy

To provide patients/patient representative with information relative to all psychoactive medication given and to obtain consent from patients and/or patient representative for the administration of said medication.

(C) Procedure

1. The physician will discuss use of medications, reason for treatment, target symptoms, justification, risk of not using medication, and possible alternatives to medication with patient and/or guardian. The patient/patient representative will be provided with information explaining their right to refuse.
2. The patient and/ patient representative will be offered the opportunity to ask questions.
3. The patient and/ patient representative will sign the Informed Consent.

Approved by: /s/ _____ Kurt Kless, MBA, MSN, RN, NE-BC Chief Nursing Officer /s/ _____ Dionis Kononov, MD Medical Director <i>Written by: Carol A. Schaaf, RN, MPA</i> <i>Review: 12/2015, 6/2017, 4/2019, 7/22</i> <i>Revision Completed By: Lindsay Watson, LSW, MSW</i>	Review/Revision Date: 12/2015 6/2017 7/12/2019 7/2022 Next Review Date: 7/2025
Policies Superseded by This Policy: New	

