# HACKETTSTOWN REGIONAL MEDICAL CENTER JOAN KNECHEL CANCER CENTER CONSENT

-----

Effective Date: January 2005 Policy No: ROC AD 2

Cross Referenced: AD036B Origin: Radiation Oncology Reviewed Date: 12/13, 6/14 Authority: Medical Director

Revised Date: 6/14 Page: 1 of 2

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

### **SCOPE**

All patient receiving treatment in the Radiation Oncology Center

#### **PURPOSE**

To obtain the appropriate consent for each patient treated in the Joan Knechel Cancer Center (JKCC). JKCC follows the Hackettstown Regional Medical Center's Administrative Policy & Procedure noted in policy AD036B

 $\frac{https://intranet.adventisthealthcare.com/policiesandprocedures/HRMC/Admin\%20-\%20Administration/AD036B.pdf$ 

## **DEFINITIONS**

N/A

## **POLICY**

The JKCC follows the Administrative Policy for Consent in AD036B and recognizes the need for interventions requiring consent as noted in AD036B XI.

### **PROCEDURE**

- 1. <u>Medical Records Release</u> (Form 10281 dated 2/09) authorizes the release of Personal Protected Health information from an individual or entity as specified by the patient or legal guardian or responsible party to the JCKK.
- 2. <u>Authorization to Disclose PHI</u> (Form 8454 dated 10/09) from HRMC and the JKCC to an individual, hospital, or other entity as specified by the patient or legal guardian or responsible party
- 3. <u>Specific consents for treatment</u> obtained by the Radiation Oncologist. The JKCC provides the following information by specific area.
  - a. Treatment to be performed
  - b. Alternative Treatments
  - c. Guarantee
  - d. For Women Only
  - e. Possible side effects during or shortly after completion of Radiation Therapy
  - f. Consent to treatment section requires the signature of patient, authorized agent, physician signature and signature of the witness. If patient cannot sign, the reason must be specified.
- 4. Specific Radiation Therapy Consent Forms include the following:
  - a. Bone Metastases
  - b. Brain
  - c. Breast
  - d. Chest
  - e. Extremity (arm / leg)

# HACKETTSTOWN REGIONAL MEDICAL CENTER JOAN KNECHEL CANCER CENTER CONSENT

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

Effective Date: January 2005 Policy No: ROC AD 2

Cross Referenced: AD036B Origin: Radiation Oncology Reviewed Date: 12/13, 6/14 Authority: Medical Director

Revised Date: 6/14 Page: 2of 2

\_\_\_\_\_

- f. Head & Neck area
- g. Pelvis
- h. Skin
- i. Spine (lower)
- j. Upper Abdomen
- k. Upper Spine
- 1. Samarium
- m. Zevalin