



ACCESSING HEALTH CARE FOR STUDENTS UNDER AGE 18 AT SAINT MARY'S COLLEGE STUDENT HEALTH CENTER

If you are under 18 years of age, state law requires us to contact your parents for most treatment at Saint Mary's College Student Health Center (see exceptions listed below).

In California, according to the law, a person becomes an adult at age 18 years old. Under age 18, parents have the right to make most health care decisions. This includes the right to consent to health care. Because of this law, there are times when it will be necessary to speak with a parent or guardian as part of being seen here at Student Health Services.

There are some situations when a person under 18 can get health care without parental consent.

These situations are defined by California and federal laws. The following services do not require parental consent:

- Family Planning
- Sexually transmitted diseases
- Mental Health Treatment and Counseling
- Pregnancy
- Drug and Alcohol related problems
- HIV/AIDs
- Sexual Assault Treatment
- Abortion
- COVID-19 Testing
- Situations involving public health reportable infectious disease care
- Suspected Child Abuse Victims

Some people under 18 have a special status in California which allows them to seek care on their own. These include emancipated minors and minors living with complete financial independence separate and apart from their parents. Unless your situation is listed above, we will need to contact your parents.

While one of our nurses will make the official required call to your parents for a verbal consent to treat, it is helpful if you give your parents a call to let them know that we will be contacting them. If you are concerned about reaching your parents, please speak with one of our nurses.

If you are interested in knowing more about this issue:

http://www.teenhealthlaw.org/fileadmin/teenhealth/teenhealthrights/ca/07_CA_MinorConsentChapter.pdf

CONSENT FOR TREATMENT OF A MINOR AT SAINT MARY'S COLLEGE STUDENT HEALTH CENTER

Printed Name of Minor Patient: _____

Patient Birth Date: _____

Printed Name of Parent or Guardian: _____

Parent or Guardian Phone # : _____

I hereby grant the healthcare providers at Saint Mary's College (SMC) Student Health Center (SHC) permission to perform or order diagnostic procedures (including, but not limited to, laboratory procedures or x-ray examinations) and provide medical treatment to the above patient, and/or make necessary referrals for their medical/psychological care. I consent to the release of medical and/or psychological information to other health professionals to whom the above patient has been referred in the course of receiving health care.

This authorization will remain in effect until the 18th birthday of listed minor.

Signature of Parent or Guardian: _____

Date: _____

Return this form to the Student Health Center, First floor of Augustine Hall, or mail to: SMC Student Health Center, 1928 St. Mary's Rd., Moraga, CA 94575 or Fax: (925) 376-2238, or email: healthcenter@stmarys-ca.edu

VERBAL/PHONE AUTHORIZATION—SHC STAFF USE ONLY

The parent or guardian grants the health care providers at Saint Mary's College of California (SMC) Student Health Center (SHC) permission to treat and/or make necessary referrals for medical/psychological care for _____, and consents to the release of medical and/or psychological information to other health professionals to whom the above patient has been referred in the course of receiving health care. They understand that care may include diagnostic procedures (including but not limited to laboratory procedures or x-ray examinations).

I have obtained telephone consent for Saint Mary's College Student Health Center (SHC) to provide medical care for the minor patient after speaking with the patient's parent or guardian:

Printed name of Parent or Guardian: _____

Duration of this Consent:

- ☐ This authorization will remain in effect until the 18th birthday of listed minor
☐ For this visit only

SHS Staff obtaining authorization:

Printed name: _____

Signature: _____ Date : _____