Minnesota Department of Corrections (DOC)

Parent or Legal Guardian
Authorization for Juvenile Resident/Incarcerated Youth Health Services

Juvenile residents/incarcerated youth housed in a DOC facility may be provided with timely access to medical, dental, mental or other health services by qualified persons as deemed necessary.

Beyond rendering basic first aid or emergency care, authorization by a parent or legal guardian is required for the DOC to provide health services to minors. A separate authorization is required: 1) for the initiation of neuroleptic medications after assessment (but not for tapering off) and 2) for non-emergency surgical procedures.

I, _____, ☐ parent ☐ legal guardian, authorize the MN Department of Corrections, to provide [describe the health services here, including "basic emergency, medical, dental, mental health, and treatment services by qualified persons as deemed necessary"] for [enter juvenile resident's or youthful offender's name here].

I understand that, except in an emergency, I will be consulted prior to any intrusive medical treatment, including the initiation or continuation of neuroleptic medication.

This authorization remains in effect until I revoke it, [insert juvenile's name here] reaches the age of 18 (at which point they may provide the necessary authorization themself), or they are released, whichever occurs first.

_____ _____

Juvenile Resident's/Incarcerated Youth's Name OID

_____ _____

Signature of Parent or Legal Guardian Date

Original: document section of electronic medical file