



Please read this document carefully. Lucile Salter Packard Children's Hospital (LPCH) requires the Terms and Conditions of Service to be signed in its entirety, without alteration.

- 1. AUTHORIZED SIGNATURE.** You may sign this form only if you are a competent adult over the age of 18 or a minor who is permitted under state law to consent to treatment. If you are a minor who does not fall within the limited exceptions provided under state law or are not competent to sign this form, the form must be signed by a properly designated representative, such as a parent or legal guardian.
- 2. TERM OF AGREEMENT.** The terms and conditions in this outpatient agreement will remain in effect for one year from the date of signature. You will be asked to sign this agreement annually. At each clinic visit, you will be asked to confirm that your demographic and insurance information is correct. If your insurance or demographic information has changed, please inform the clinic staff.
- 3. MEDICAL CONSENT.** I, the undersigned, consent to the general treatment and procedures that may be performed during this hospitalization or as an outpatient (including emergency services). These procedures may include but are not limited to laboratory procedures, x-ray examinations, medical or surgical treatment or procedures, anesthesia, or hospital services provided to the patient under the general and special instructions of the patient's physician or surgeon. I understand that it is the responsibility of the patient's physician to obtain the patient's informed consent when required for specific medical or surgical treatment and special diagnostic or therapeutic procedures. I understand and agree that at the request of the attending physician, allied health practitioners (such as physician assistants and nurse practitioners) may participate in the patient's care.
- 4. TEACHING INSTITUTION.** LPCH is a teaching facility, training physicians, surgeons, nurses and other health care personnel. At the request, and under the supervision, of the attending physician, I agree that residents, interns, medical students, post-graduate fellows, visiting faculty members and other health care personnel in training may participate in the care of the patient. Certain medical services may be provided by individuals who do not have a physician's certificate but are qualified to participate in a special program as a visiting faculty member.
- 5. PHOTOGRAPHY.** I consent to the taking of pictures, videos, or other electronic reproductions of the patient, including of their medical or surgical condition or treatment, and the use of the pictures, videos or electronic reproductions for purposes permitted by law. I consent to the evaluation and examination by a physician or other health team professionals who may be physically distant from me via virtual technologies, including but not limited to two-way video, digital images, and other virtual technologies as determined by my providers. I understand that my digital images in any form may be used for Stanford Medicine purposes, such as treatment, quality improvement, patient safety, education and security. Under specific circumstances and as required by law, I may be asked for a separate consent prior to the taking of pictures, videos or other electronic reproductions and the use or disclosure of those pictures, videos, or electronic reproductions. If the image is being used for research purposes and could be directly used to identify the patient, I will be asked for authorization to use or disclose the image as required by law.

I understand that under California law I may not photograph, film or record any image of or conversation with a SHC employee or physician or another SHC patient without the explicit consent of all parties involved and that violation of this law may result in criminal or civil liability.

- 6. LEGAL RELATIONSHIP BETWEEN LPCH AND PHYSICIANS.** Lucile Salter Packard Children's Hospital at Stanford is an independent nonprofit organization that is affiliated with but separate from Stanford University. The physicians who provide care at Lucile Salter Packard Children's Hospital at Stanford's facilities are faculty, foundation, or community physicians who are not employees, representatives, or agents of Lucile Salter Packard Children's Hospital at Stanford. Lucile Salter Packard Children's Hospital at Stanford does not exercise control over the care provided by such faculty, foundation, and community physicians and is not responsible for their actions.

