

IMPORTANT INFORMATION

IF YOU DECIDE NOT TO HAVE RECOMMENDED EVALUATION OR FOLLOW-UP AT THIS TIME

YOU HAVE BEEN ADVISED TO HAVE: _____

TO FURTHER EVALUATE YOUR CONDITION THAT INCLUDES:

Additional evaluation is necessary to determine more accurately whether a problem exists. Although further evaluations frequently rule out serious problems, we want to ensure that if something serious is present, the diagnosis is made soon in order to refer you for the appropriate treatment.

Failure to follow the suggested recommendations may result in risk to your health or threat to your life. We want to be sure you understand the importance this could have for your health.

Please sign below to confirm that you understand these recommendations and that you are deciding not to follow this advice.

We encourage you to share this information with other family members and discuss the importance of this decision with them. For this reason, we are providing you with a copy of this document to take with you.

We hope that you will change your mind and have further evaluation as recommended. If there is anything we can do to assist you in this process, please let us know.

Patient Signature

Date

PLEASE TAKE A COPY OF THIS DOCUMENT WITH YOU!

Note for Practices:

An informed refusal is similar to an informed consent, except the patient is being informed of possible risks of not following through with your recommendations (e.g., to get a specific work-up or treatment). The signed form is a way to document this discussion for particularly high-risk problems. If used, a signed copy should go on the patient's chart and a second copy should be given to the patient to take with him/her. If a patient does not want to sign it, make a note on the form and place it in the medical record or make a separate note in the medical record to indicate that the possible risks were discussed.