PRACTICE DIRECTION
Current and updated as of: September 12, 2019

4.3 Informed Consent to Treatment

Purpose:
Informed Consent is the voluntary agreement to a course of action, based on a process of clear communication between the client and the physiotherapist. Informed consent is both a legal requirement as well as a vital component of physiotherapy treatment.

Ensuring the client provides informed consent is also described in the Essential Competency Profile for Physiotherapists in Canada¹

Policy:
The physiotherapist is obligated to obtain informed consent for all assessment and treatment procedures. In order for consent to be informed, certain requirements must be met. Consent must be made voluntarily, without fear or duress, by the client. The client must be properly informed and the client must have the capacity to consent. The physiotherapist must understand that the client has the right to refuse treatment or withdraw consent for treatment at any time.

Guidelines:
A physiotherapist demonstrates the practice standard by:
1. Adequately informing the client. The physiotherapist is obligated to provide certain information and allow the client to ask questions. The information provided must allow the client to reach an informed decision. The following is a list of information to be discussed with client the:
   - Diagnosis, and/or clinical impression, as known;
   - Nature of treatment procedure(s) that is being suggested;
   - Significant risks, benefits of treatment and reasonable alternatives;
   - Potential risks/consequences if treatment is refused;
   - Reasonable additional procedures which may be necessary, and;
   - Remote risks, where the potential problem is serious

2. Obtaining ongoing consent from their client. Consent may be obtained orally, in writing or may be implied from the client’s words, writing or actions. The client record must contain documentation of informed consent for assessment and treatment, or refusal to treatment (see Practice Statement 4.17 on Recording Keeping).
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- It is preferable to seek a current, signed written informed consent from the client. A written consent form includes the patient’s name and signature, the date, a brief description of the treatment or procedures and the name of the physiotherapist that will perform it, and any other relevant information communicated to the patient. However, in certain circumstances this may be difficult and a verbal or implied consent may be appropriate.

- If the treatment plan is substantially altered consent must be updated.

3. The physiotherapist must ensure that the client has the competence to consent to treatment. This implies that the client has the ability to understand the information provided and to make an informed decision about the proposed course of action. If the client is incapable of providing informed consent, it is acceptable to receive informed consent from immediate family members, guardians or the public trustee.

4. Other situations where exceptional care should be taken to ensure appropriate informed consent from the client, immediate family, guardians or the public trustee.

Clients include:
- Psychiatric or neurological problems
- Speech or hearing impairment
- Impaired state of cognition, severe pain or depression
- Impaired through substance abuse
- Altered consciousness
- Unable to provide appropriate informed consent due to age (i.e. children)