

<b>Policy Title:</b>	<b>HANDLING OF PATIENTS UNDER LEGAL OR CORRECTIONAL RESTRICTIONS</b>		
<b>Category:</b>	2 - Patient Rights	<b>Policy No.:</b>	216
<b>Originally Issued:</b>	7/27/1983	<b>Update (U)/Revised (R):</b>	4/25/2018
<b>Distribution:</b>	<b>Hospital-Wide</b> <input checked="" type="checkbox"/>	<b>If not Hospital-Wide, Other:</b>	

**PURPOSE:**

To define hospital policy on managing and caring for patients who are under legal or correctional restrictions.

**DEFINITION(S):**

None

**POLICY:**

Olive View-UCLA Medical Center will ensure patients under legal or correctional restrictions receive medical care and services appropriate to their medical condition.

**PROCEDURE:**

Adult patients who are prisoners of the legal system shall be given emergency care and, if further treatment or inpatient stay is necessary, the patient will be transferred to LAC+USC Medical Center Jail Ward.

In the case of an adult patient under legal or correctional restriction who requires major surgery or relatively high-risk medical procedures or treatment, the patient must be provided and sign the appropriate Olive View-UCLA Medical Center informed consent form.

Minors who have been removed from the custody of parents by the court and placed on probation are considered wards of the court and, as such, the Probation Officer on the case is the minor's legal guardian.

Probation Department form 714B (Rev. 1/73) when signed by the Probation Officer is sufficient consent for general medical care for non-major illnesses necessary to protect the physical and mental health of the minor. This type of treatment includes but is not limited to immunizations, diagnostic examinations, dental care, psychiatric care and minor surgical procedures.

In the case of a Probation Department patient who requires major surgery or relatively high-risk medical procedures or treatment, the appropriate hospital informed consent must be given and signed either by the parent or the Probation Officer. The physician must sign to the effect that he/she explained the procedure to which ever responsible party was signing the consent,

including the risks involved, etc. Any special consent that may be required must also be signed by the parent or the Probation Officer and the physician where applicable.

**ATTACHMENTS/FORMS:**

None

**REFERENCE(S)/AUTHORITY:**

None

**APPROVED BY:**

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