

Information for Parents Regarding

Parental Absence During Children's Health Care Visits

It is requested by the Nurse Practitioners of Grants Pass Pediatrics that a parent or legal guardian (grandparents do not qualify unless they have custody) accompanies all children to the office for routine exams (well child checks, physical exams, and medication reviews). If this is impossible for you, call and discuss with us ahead of time. At these visits, please bring your child's immunization record so that we may review their status and update their chart if immunizations were given elsewhere.

It is strongly recommended that a parent or legal guardian be present at all office visits, not just routine exams. If this is not possible the parent or guardian may sign a permission slip to permit your child to be examined and treated.

PARENTAL CONSENT FORM

I give permission for _____

(Name of person who may bring child other than parent or guardian.)

To take my child: _____

(Name of child)

To Grants Pass Pediatrics to examine and treat my child. I also give permission for Lisa Callahan CPNP, or Lori Simmons FNP-C, to examine and treat my child.

My child has the following drug allergies: _____

(Signature of parent or legal guardian.)

(Date)

This permission is valid for a maximum of one year. It will expire _____