

Medication Consent Requirements

Although a beneficiary/legal representative signature is no longer required, obtaining and documenting consent from beneficiaries/their legal representatives when prescribing psychiatric medications is a clinical best practice and required by ACBH.

[Welfare and Institutions Code \(WIC\) 5325.3, Article 7](#) applies to administration of antipsychotic medications to voluntary patients who consent to receiving those services as part of Specialty Mental Health Services covered under Medi-Cal, or as part of community mental health services, a health facility (24 hour services), or a facility that has a community residential treatment program.

This regulation requires that providers maintain records of written consent that contain both of the following:

1. A notation that information about informed consent to antipsychotic medications has been discussed with the patient, including the following:
 - The nature of the patient's mental condition
 - The reasons for taking such medication, including the likelihood of improving or not improving without such medication, and that consent, once given, may be withdrawn at any time by stating such intention to any member of the treating staff
 - The reasonable alternative treatments available
 - The type, range of frequency and amount (including use of PRN orders), method (oral or injection), and duration of taking the medications
 - The probable side effects of these drugs known to commonly occur, and any particular side effects likely to occur with the particular patient
 - The possible additional side effects which may occur to patients taking such medication beyond three months. The patient shall be advised that such side effects may include persistent involuntary movement of the face or mouth and might at times include similar movement of the hands and feet, and that these symptoms of tardive dyskinesia are potentially irreversible and may appear after medications have been discontinued.

2. A notation that the patient understands the nature and effect of antipsychotic medications and consents to administration of those medications.

ACBH requires providers to document the above details for all psychiatric medications being prescribed to their Medi-Cal beneficiaries.

The following Template can be used to copy/paste the needed information into the Electronic Health Record:

Medication Consent Template

Discussed the following information with ____patient or ____legal representative

- The nature of the patient's mental condition
- The reasons for taking such medication, including the likelihood of improving or not improving without such medication, and that consent, once given, may be withdrawn at any time by stating such intention to any member of the treating staff
- The reasonable alternative treatments available
- The type, range of frequency and amount (including use of PRN orders), method (oral or injection), and duration of taking the medications
- The probable side effects of these drugs known to commonly occur, and any particular side effects likely to occur with the particular patient
- Possible side effects of taking anti-psychotic medication beyond three months, including persistent involuntary movement of the face or mouth, possible similar movement of the hands and feet, and that these symptoms of tardive dyskinesia are potentially irreversible and may appear after medications have been discontinued.

The patient understands the nature and effect of medications and consents to administration of those medications.