

## **Vickery Pediatric's Medical Chaperone Policy**

Created 1.15.24

Vickery Pediatrics (VP) is sensitive to the needs of our patients for comfort and privacy for their office visits. There are times during a child's growth and development that more sensitive exams are necessary. We will perform physical examinations of infants, toddlers and children with a parent or guardian present. For children  $\geq 11$  years of age (regardless of gender), when a parent or guardian is unavailable or when a patient requests it, a medical chaperone will be made available. Patients 16 years of age or older can consent or refuse for a medical chaperone on their own. Additionally, the doctor may also request that a medical chaperone be present if appropriate for an exam of a patient. We respect unique individual preferences and comfort levels of our patients and families when it comes to the presence of a medical chaperone. You have the right to request as well as decline the presence of a medical chaperone. VP encourages open communication. Please discuss any questions or concerns you may have about a medical chaperone with our medical team. We will do our best to accommodate your specific chaperone requests as staffing allows.

**We have initiated this policy due to new regulations mandated by the Georgia Medical Board** as well as our commitment to ensuring the highest level of care and comfort for our patients during their visits to our office. The purpose of this policy is to provide a consistent, standard, safe environment for our patients. We acknowledge that there can be physical, psychological and cultural reasons why medical chaperones may be requested or needed. This policy promotes respect for patient's dignity and comfort. Any sensitive medical examinations should only be performed in accordance with this policy. The medical chaperone rule is outlined in **Rule 360-3-02 (12)** and is aimed to protect patients during sensitive physical exams and procedures. We believe that compliance with the regulations as set forth by Georgia Medical Board's Chaperone Rule will enhance the trust and confidence that you have placed in Vickery Pediatrics.

A **medical chaperone** is a trained clinical staff member (physician, nurse, medical assistant or front office assistant) that serves as a witness to the examination taking place. A chaperone may be present for sensitive physical exams/procedures. The medical chaperone will witness the sensitive exam with a direct line of sight. They are educated on the importance of patient comfort, dignity and privacy throughout all aspects of medical care.

A **sensitive physical exam/procedure** means a visual inspection or physical examination that involves fingers, swabs, or medical equipment on or into the vagina, labia, penis, testicles, urethra or rectum. It may also include a perineal assessment that involves inspection of the vaginal vault, cervical assessment or palpation of the breast of a female patient.

## **Medical Chaperone Request/Denial Form**

Created 1.15.24

Examinations are an important part of the delivery of specific acute care and preventative care delivery. Your child's scheduled appointment with their physician may include a sensitive physical examination. **A sensitive physical examination is defined as a genital or rectal examination regardless of gender; or a breast examination for patients who identify as female.**

It is the policy of Vickery Pediatrics to offer patients who may undergo a sensitive examination the opportunity to have a medical chaperone present. A medical chaperone is a healthcare professional (not a personal friend or relative of the patient or provider) who is trained as a chaperone to be an advocate for the patient.

As a parent or guardian of a patient, who cannot consent for their own care, you have the right to elect to have present or decline to have present a medical chaperone during a sensitive examination. Additionally, you have the right to decline that your child undergo a sensitive medical exam today.

**For today's examination, I agree to my child having a sensitive medical examination as part of their office visit (please check one box only regarding the use of a medical chaperone).**

☐ **YES:** I elect to have a medical chaperone present during the sensitive examination. I understand that if no medical chaperone is available for the examination, I have a right to decline the examination and will be given the opportunity to reschedule.

☐ **NO:** I decline to have a medical chaperone present for my sensitive medical examination. I understand that my physician may defer the examination if in their professional judgement that deferring the examination is in the patient's best interest.

**OR**

☐ I **decline to undergo a sensitive physical examination (as defined above) as part of my regularly scheduled check-up.**

\_\_\_\_\_  
Patient Name

\_\_\_\_\_  
Patient's Date of Birth

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Today's Date

Clinic Staff Only	
Physician's Name:	Date of Exam:
Chaperone's Name:	Title/Credentials:
Portion of exam witnessed: (circle) Genital Rectal Breast Other _____	