

Does the procedure involve removal of a bodily organ, amputation of a limb, abortion, sterilization, electroconvulsive therapy, psychosurgery, gender reassignment treatment/surgery, or involuntary health treatment?

YES

NO

Does the physician recommend that the procedure be performed urgently within the next 24 hours to preserve life or prevent serious impairment of the individual's health?

Is the procedure to surgically place an initial gastrostomy tube for long term artificial nutrition?

YES

NO

YES

NO

Send the physician the Physicians Affidavit of Emergency Need to be completed and returned to the GSSW; upon receipt of completed affidavit, immediately review with GFSOS, GFSOS to provide consent, notify branch manager that emergency consent was provided, and enter event in KYGFIS for consent given with scanned affidavit attached.

Send the physician the Physicians Request for Consent Requiring Court Approval to be completed by two physicians (MD or DO) and returned to the GSSW with progress notes from each of the two physicians. Upon receipt of the documentation review with GFSOS to ensure required information has been provided. Complete Request for Legal Assistance. Send the two Physicians Request for Consent Requiring Court Approval, two progress notes, Appt Papers/ Disability judgement, and the Request for Legal Assistance to both Nurse Consultants for review. They will then forward to Director to send to OLS. Once motion is received, GSSW files info w/ the District Court. Once Court approval is received, GSSW provides approval/consent to the provider/hospital and enters consent in KYGFIS with all documentation.

Provide caller with numbers to reach Nurse Consultants  
Leanna 502-229-5992  
Mary 502-226-0578  
OR send email to GUARDIANSHIP.RN@ky.gov with the individual's name, the caller's name, and a telephone number. If approved, you will be contacted by Nurse Consultant to provide consent.

Provide consent and document in KYGFIS.

**What to document in KYGFIS for every consent provided-**

Procedure to be performed, name of physician performing procedure, address and telephone number of the location where procedure will be performed, reason procedure is needed, date procedure is to be performed, and first and last name of person that consent was given to. A follow up should be entered once the procedure or surgery is complete. Include in the annual report for the court.