Informed Choice / Refusal Documentation Template

This template is intended to support midwives in documenting informed choice discussions, including client understanding, decision-making, and any refusals of care. Use respectful, objective language and provide enough detail to support continuity of care and risk management.

Client Information		
Client Name:		
Date of Birth:		
Procedure/intervention/3creening disc	.usseu	
Clinical indication or reason for discus	sion:	
Discussion Summary		
Information provided (check all that ap	ply):	
☐ Risks of the procedure or inte	ervention	
\square Benefits of the procedure or intervention		
\square Alternatives (including no int	ervention)	
\square Opportunity to ask questions	3	
☐ Client demonstrated unders	tanding	
□ Educational materials provided (spe	cify):	
Client Decision		
\square Accepted the procedure/intervention	1	
☐ Declined the procedure/intervention		
Client's stated reasons for decision (op	otional):	
Signatures		
Client Signature:	Date:	
Midwife Signature:	Date:	

Note: This template is provided for informational purposes only and does not constitute legal advice. Midwives should ensure that all documentation practices comply with state regulations and professional standards.