



# Consent Forms for Emergency Contacts



## What You Need to Know

The federal confidentiality law for substance use disorder (SUD) treatment records, 42 CFR Part 2 (“Part 2”) generally requires written patient consent to share information with a patient’s family or other loved ones, including during an emergency.<sup>1</sup> It may not be possible to obtain a patient’s written consent during a medical emergency, so Part 2 programs may seek the patient’s written consent upon admission (or any other time) for emergencies. **Programs should clearly communicate how and when emergency contacts may be notified.**

### Practical Considerations

If the patient agrees to provide written consent to share information during an emergency, programs can take the following considerations into account when filling out the consent form:

- Identify the patient’s chosen emergency contact on the recipient line and include the individual’s contact information.
  - **Example:** Sarah Joe, 555-222-3333.
- Describe the amount and kind of information that may be disclosed. Limit the information to **the minimum necessary** to alert the family member about the emergency. There may be no need to share the patient’s diagnosis or other treatment details.
  - **Example:** I authorize disclosure about my status as a patient at the program, my current location, and any health information related to the emergency.
- Describe when the program will share information with the emergency contact. Discuss with the patient (and train staff) about what constitutes an “emergency.” Calling 911 for emergency medical services is a common example. However, calling a patient’s emergency contact because the patient missed a counseling session or because their insurance information expired is not a common understanding of “emergency.”
  - **Example:** In case of emergency.
- Identify when the consent will expire.
  - **Example:** Unless I revoke my consent earlier, this consent will expire upon my discharge from the program.

[Click here](#) for a sample consent form that incorporates all the requirements in 42 CFR Part 2.<sup>2</sup>

## Notifying the Emergency Contact

When notifying the emergency contact, remember to follow the consent form: only the individuals listed on the consent form should be notified, and information should be limited to the minimum necessary amount that is described on the form.<sup>3</sup>

**Patients have a right to maintain the confidentiality of their treatment records and accidentally sharing someone's treatment status with family or friends can seriously harm the patient.**

## Revoked and Expired Consent

Patients have the right to revoke their consent. If revoked, or if the consent has expired, programs may not disclose any information to a patient's family member or other loved one, even in cases of emergency.

### Note:

The above information is for Part 2 programs. For information about how non-Part 2 providers (like emergency rooms) can engage with families after an emergency, see [this resource](#).

## For More Information

### Resources

This resource is one of many that are available within the Center of Excellence for Protected Health Information's resource library which can be found at [coephi.org](https://coephi.org).

### Request Technical Assistance

You can request brief, individualized technical assistance and join our mailing list for updates, including news about the publication of new resources and training opportunities, [here](#).

## Disclaimer

Resources, training, technical assistance, and any other information provided through the Center of Excellence for Protected Health Information do not constitute legal advice. For legal advice, including legal advice on other applicable state and federal laws, please seek out local counsel.

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## References

1. Part 2 provides an exception to the requirement to obtain written consent during a medical emergency, but disclosures can only be made to medical personnel in order to treat a bona fide medical emergency. 42 CFR § 2.51
2. See 2.31 for additional consent form requirements.
3. The disclosure also needs to comply with all the usual procedures for sharing information with patient consent, including the notice prohibiting re-disclosure. 42 CFR §§ 2.31, 2.32.