An NPR account of a teenager getting vaccinated despite his parents opposition is making the rounds in the press and on social media. This example acknowledges the adolescent pursued this course after turning 18 years old. What makes this particular story quite compelling is the subject did his own research which disputed his parents position to come to his independent conclusions. If you ever have the privilege of working with pediatric populations, then you will be inspired by countless examples of the next generation using critical reasoning and maturity to chart their own path. In this case, the teen expresses his love for his parents while appreciating that isn’t mutually exclusive with finding them misguided on this topic. It’s a great story.

But, it is essential issues of the capacity to consent to medical treatment do not get glossed over while there is such attention and a spotlight. When dealing with minors, which this teen by legal definition is not, the terrain can get murky.

This article will address broad overviews of some of these complexities for more universal understanding, but to fully comprehend what actual laws are in place investigating your individual state is required and discussing these findings and more with your doctor who practices there is most fruitful and informative.

Kids are often a great source of information and can sometimes influence parents on a host of subjects - especially when things are more en vogue in changing times and a shifting culture. But, in this instance, the teen’s age allows him to decide for himself to receive medical treatment. Most of the time, parental consent is required for those under age 18 years to see a doctor, let alone receive treatment and allow any medical procedure to be performed (e.g. vaccine, physical
examination, throat culture, blood draw, prescription etc).

Special circumstances or exemptions occur in limited scope while consent, in general, is variable by state. If the parents cannot be reached in an emergency, then medical care can be provided in life-saving, urgent conditions. Another example would be in a legally emancipated minor. If a minor has given birth and is a parent, for instance. Issues with respect to pregnancy or sexually-transmitted infections can exclude parental involvement unless the underage teenager consents.

For example, in Washington state [3] people 13 and older can consent to inpatient mental health treatment (providers must notify parents/guardians) and outpatient substance abuse treatment (under certain circumstances providers must notify parents/guardians). To review New York patient care and consent for minors laws, click here [4]. While most states require parental permission for medical interventions, a newer legal concept called the Mature Minor Doctrine isn't always clear or permissible in every state - but, this ABC affiliate/KATV report [5] indicates Arkansas "allows teens to petition to make their own medical decisions."

To appreciate the nuances of the bioethics and the difference between medical and legal definitions of assent versus consent in pediatrics, review this work here [6].

In pediatrics, adolescent autonomy is highly encouraged especially when a teen has the requisite maturity - so coming to a visit unattended as long as there is formal parental consent can be routine. So is coming with a grandparent or nanny or otherwise, but in these instances, signed written permission might be an office policy and being reachable to obtain additional consent can often be necessary. Adjustments with respect to assent of the minor as he or she evolves in maturity is beneficial to their development. Respecting their input is important.

Additional difficulties arise in situations where parents do not agree on medical care for a child. Or, in divorce and custody scenarios where there can be many complicating factors.

This problem can present itself in a number of forms. For example, with younger kids especially, you can have one parent in favor of vaccination and another refusing them. So, the permutations become problematic. The good news is an established, trusted relationship with a pediatrician is usually more successful than not in best navigating these sometimes tricky waters and attaining consensus (which can successfully avoid any escalation or court involvement).