



Standard of Practice: Consent

Date: January 1, 2024

Amended:

Client outcome

The client receives the information they need to make informed decisions about their care and is given the opportunity to ask questions of their Registered Massage Therapist (RMT). Assessment and/or treatment only begins after the client has given the RMT their consent. The client is aware they can withdraw their consent, in full or in part, at any time.

Registered Massage Therapist outcome

The RMT obtains informed consent from clients or their substitute decision-makers prior to and throughout assessment and treatment.

Requirements

1. Prior to conducting an assessment, providing treatment, or modifying a treatment plan, the RMT must obtain the client's consent. Consent must include a discussion with the client about the following elements:
 - The nature of the treatment;
 - The areas of the body to be treated;
 - The expected benefits;
 - Risks and side effects;
 - Alternative courses of action;
 - Likely consequences of not having treatment; and

- The client's right to ask questions about the information provided, and that assessment or treatment will be stopped or modified at any time at their request.
2. If the RMT does not have sufficient information about the risks, benefits, and contraindications of a modality or product, including topical products and lubricants, then consent cannot be obtained, and the modality or product must not be used or applied during the treatment.
 3. The RMT must have an awareness that there are parts of the body which may be considered to be sensitive areas for some clients (for example, the chest wall, upper inner thigh, and gluteal regions). These areas are discussed as part of the informed consent but do not require additional consent, with the exception of breast massage. Breasts must not be touched, except when assessment and/or treatment of the breast is requested by the client for a clinically indicated reason (for example, surgical intervention or prenatal and perinatal care). Additional informed consent for the breast must be obtained and documented prior to each treatment.
 4. Consent must relate to the assessment and/or treatment being proposed, be voluntary, and not obtained through misrepresentation or fraud.
 5. The client who is providing consent must be capable. If the client is incapable, then a substitute decision-maker can provide consent on behalf of the client. If a client is incapable and no substitute decision-maker is available, RMTs *must* refuse to provide assessment and/or treatment.
 6. The RMT must monitor the client throughout assessment and treatment and, when appropriate, reverify consent.
 7. RMTs must document consent conversations in the client health record within 24 hours of the assessment and/or treatment.

Relevant documents

- Code of Ethics
- *Personal Health Information Act (PHIA)* (Nova Scotia)