Authorization for Minor Patient Accompaniment

If a minor patient will be accompanied to their appointment by someone other than their parent or legal guardian, written authorization must be provided before the patient can be checked in.

Required Information

The authorization letter or email must include:

- Parent or legal guardian's full legal name
- Copy of the parent or legal guardian's valid photo ID (driver's license, state ID, or passport)
- Full legal name of the adult bringing the patient to the appointment
- Confirmation that the accompanying adult is at least 18 years of age
- Patient's full legal name
- Patient's date of birth
- Appointment date and location
- Parent or guardian's phone number
- Statement authorizing the accompanying adult to bring the patient to the appointment

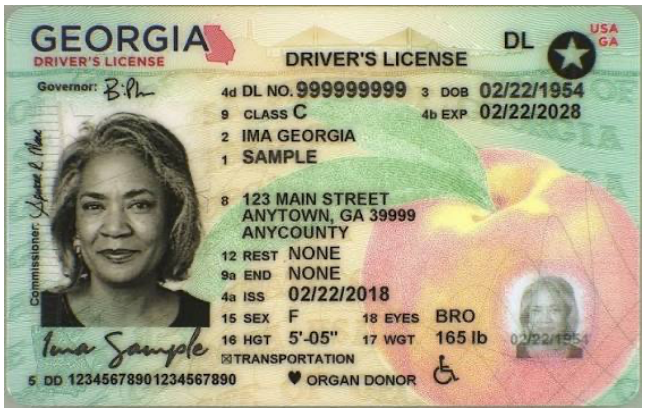
Important

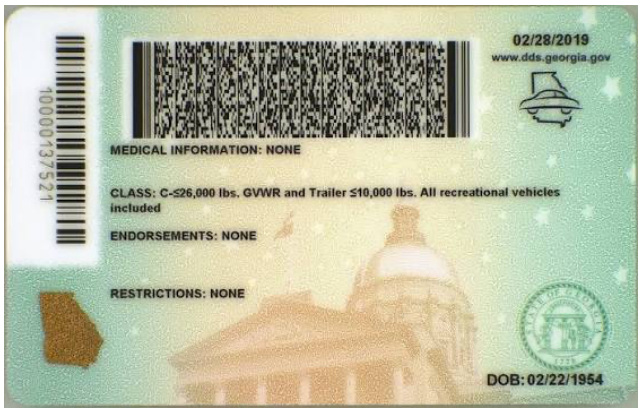
- The parent or legal guardian must be available by phone for the duration of the appointment in case consent or additional information is needed.
- The authorization letter/email and copy of the guardian's photo ID must be received prior to patient check-in.
- Failure to provide the required documentation may result in the appointment being rescheduled.

Sample Authorization

I, (parent/legal guardian's full name), authorize (name of accompanying adult) to bring my child, (patient's full name, DOB), to their appointment on (appointment date).

I will remain available by phone during the appointment and may be reached at (phone number).





If you have any questions, please contact our office at 404.252.5206 prior to the appointment.
Thank you,
Georgia Urology Pediatric Team