

# Central Texas Pediatric Orthopedics and Scoliosis Surgery

**Central:**  
1301 Barbara Jordan Blvd. Suite 300  
Austin, TX 78723

**Cedar Park:**  
1301 Medical Pkwy. Suite 330  
Cedar Park, TX 78613

**South:**  
1221 W Ben White Blvd. Suite 250B  
Austin, TX 78704

**Four Points (PT only):**  
6911 N FM 620, suite C200  
Austin, TX 78732

**Westlake (PT only):**  
3532 Bee Caves Rd. Suite 110  
Austin, TX 78746

**South (PT only):**  
1807 W Slaughter Ln, Suite 600  
Austin, TX 78748

## Consent for Treatment in Absence of Legal Guardian

Date: \_\_\_\_\_

I, \_\_\_\_\_, as the legal guardian of patient \_\_\_\_\_,  
(Guardian's Name) (Pt. name)

date of birth \_\_\_\_\_, do hereby give permission to \_\_\_\_\_  
(Responsible Party)

to make any legal decision during my absence for date of service \_\_\_\_\_.

Dr. \_\_\_\_\_ may proceed with necessary treatment.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Signature of Responsible Party

Verbal consent given by: \_\_\_\_\_

Witness: \_\_\_\_\_

Jay Shapiro, M.D. – John Williams, M.D. – Robert Dehne, M.D. – M. Catherine Sargent, M.D. – Ryan Murdock, M.D. -  
Hilton Gottschalk, M.D. – Matthew Ellington, M.D. – Brian Kaufman, M.D. – Christopher D. Souder, M.D.

Kevin McHorse, PT, SCS, Cert. MDT – Brian Kratz, PT, SCS, MSPT – Megan Redlich, PT, DPT, Cert. MDT  
– Chelsey Walker, PT, DPT – Sarah Luin, PT DPT – Jimmy Simmonds, PT, MSPT – Karen Ayala, OTR, CHT