**Radical Informed Consent Script**

Hi, my name is [your name] and I use [your pronouns]. I wanted to provide some information about your chart so you’re aware of how your personal health information is kept. Our electronic medical record is visible to [mental health only, mental and medical health, etc.] so any provider within that setting will be able to see your name. I can update this to include your chosen/lived name, pronouns, gender identity, and sexual orientation. If I do, providers [specify who] will also be able to see it.

Our front desk staff/administrative staff will [or won’t] also be able to see the changes I make. I can also update this information at any point if you want to try a new name, different pronouns, or make any adjustments whatsoever. I typically work closely with my colleagues to ensure they’re calling you by your correct name and gendering you correctly as well. If you’re ever misgendered, deadnamed, or misnamed, please let me know so I can help support you in figuring out what you’d like to do about it.

I can document using your chosen name and pronouns or I can use your legal information if that is more comfortable to you. Your family will not have access to this information or your chart unless you signed consent for them to have this information and you specifically requested documentation from your chart.

**For medical providers:**

Typically for procedures to be approved, my charting has to follow the insurance guidelines and adhere to the sex binary. Unfortunately, insurance companies do not understand gender in the complex and non-binary way that we do, so if you ever see any of my notes or charting, it may feel upsetting and inaccurate. I promise to always do my best to let you know in advance if that could happen, but my ultimate goal is to ensure you always have access to the services you need. Is there anything you need from me around this to help make this part easier for you?