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Mature Minor Doctrine

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Abstract

This brief will explore the legal topic of the mature minor doctrine, and developmental differences in decision making between adolescents and adults. In the state of Connecticut minor children under the age of 18 are unable to make their own medical decisions. Such as consenting to lifesaving treatment or preventative care. In the case of the Supreme court of Connecticut versus 17-year-old Cassandra C., Cassandra was found medically incompetent to decide on her cancer treatment plan. To better inform the court, this brief will cover several research articles discussing the maturity and competence of adolescents in the medical decision-making process. The current literature suggests that adolescents have less developed decision-making processes compared to adults. Many states require parental consent for the medical treatment of mature minors, including Connecticut. While the mature minor doctrine is a legal agreement accepted by other U.S. states, stating matured unemancipated minors may make their own medical decisions without the consent of their parents. The current literature does support that there is a decision-making difference between adults and adolescents, yet through medical competency testing a mature minor can come to a reasonable decision on his or her own treatment plan. In the case of Connecticut versus Cassandra C. a medical competency test could be used to determine her ability to decide upon her own treatment.