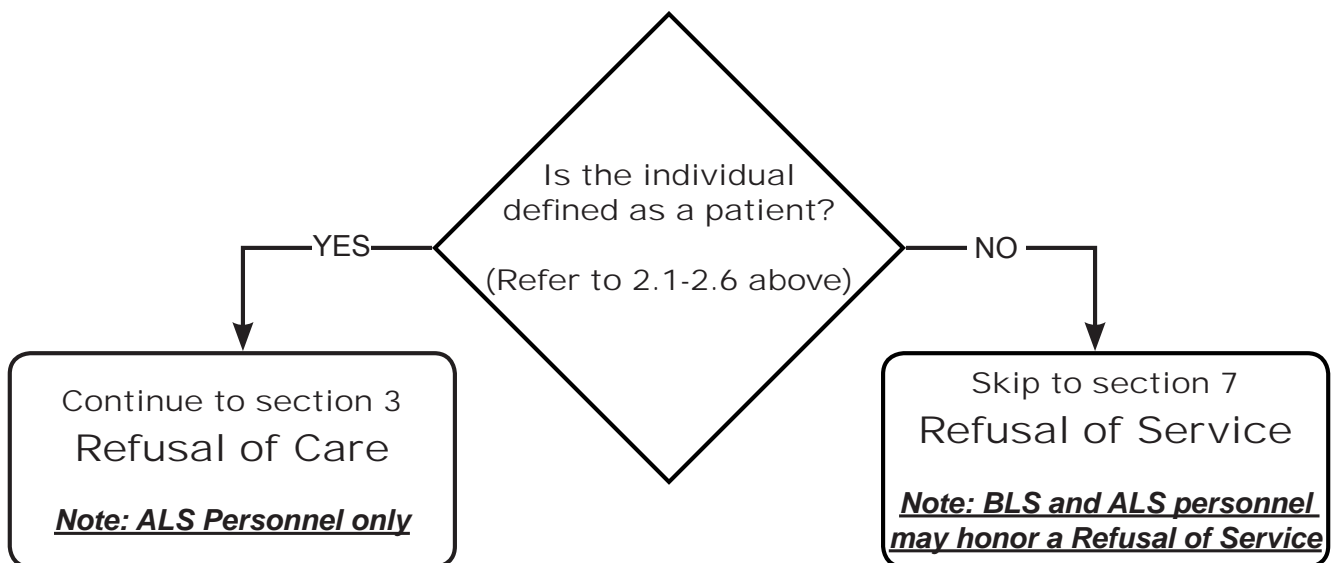

CONSENT AND REFUSAL GUIDELINES

1. INTRODUCTION:

- 1.1 Competent adults may refuse EMS care and/or transportation
- 1.2 All potential patients at the scene of an EMS system call must be offered medical care/transport
- 1.3 Consent to treat and/or transport may be actual, expressed, or implied (the patient is unable to give consent but is in need of medical attention - e.g., an unconscious patient)
- 1.4 If the individual consents, treat only according to the scope of the consent. Competent adults can give partial consent, (e.g., transportation without treatment). There is no legal duty to provide unwanted treatment or transportation

2. PATIENT DEFINITION:

- 2.1 The definition of 'patient' is any individual that:
 - ▶ Has a complaint suggestive of potential illness or injury
 - ▶ Requests evaluation for potential illness or injury
 - ▶ Has obvious evidence of illness or injury
 - ▶ Has experienced an acute event that could reasonably lead to illness or injury
 - ▶ Is in a circumstance or situation that could reasonably lead to illness or injury



NOTE TO BLS PERSONNEL: If the individual is defined as a patient and is refusing care, the patient requires an assessment by an ALS provider. Treat as necessary while awaiting the arrival of ALS personnel.

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3. REFUSAL OF CARE - applies to patients who by direct examination, mechanism of injury, or by initiating a patient relationship by dialing 9-1-1 for medical care for themselves, are refusing medical care/transportation. Only ALS personnel may honor a refusal of care

3.1 In order to refuse care a patient must be legally and mentally capable of doing so by meeting all of the following criteria:

3.1.1 Is an adult (18 or over), or if under 18 legally emancipated

3.1.2 Understands the nature of the medical condition, and the risks and consequences of refusing care

3.1.3 Exhibits no evidence of:

- ▶ Altered level of consciousness
- ▶ Alcohol or drug ingestion that impairs judgment

3.1.4 Is oriented to Person, Place, Time, and Situation

3.2 Actions:

3.2.1 If the patient is legally and mentally capable of refusing care:

- ▶ Honor the refusal
- ▶ Document thoroughly. Complete a PCR and a "Refusal of Care" form

3.2.2 If the patient cannot legally refuse care or is mentally incapable of refusing care:

- ▶ Document on the PCR to show that the patient required immediate treatment and/or transport, and lacked the mental capacity to understand the risks/consequences of refusal. (implied consent)
- ▶ Treat only as necessary to prevent death or serious disability and transport
- ▶ Do not request a 5150 hold unless the patient requires a psychiatric evaluation

4. BASE CONTACT: A refusal of care may be against the advice of the EMS responders and/or the base hospital physician (AMA); however, a competent adult has the legal right to refuse care. For patients with acute conditions (see #2 and 3 below) every effort should be made to convince the patient to be transported. Be persuasive - get help from:

- ▶ Family members, friends, etc.
- ▶ The Base Physician
- ▶ Consider calling law enforcement especially if the patient is a child

4.1 **Paramedics should contact the Base Physician:**

4.1.1 For any patient being treated and/or transported involuntarily

4.1.2 Whenever the refusal of care and/or transport poses a threat to the patient's well-being

4.1.3 Additional examples of situations where Base Physician contact should be made include, but are not limited to:

- | | |
|--|---|
| ▶ Markedly abnormal vital sign | ▶ Any condition for which field personnel believe that admission to an emergency department/hospital may be necessary |
| ▶ Uncontrolled hemorrhage | |
| ▶ Suspected ischemic chest pain | ▶ Any time medical treatment is begun and then the patient refuses transport |
| ▶ Suspected new onset CVA | |
| ▶ Any patient meeting critical trauma criteria | |

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5. REQUIRED DOCUMENTATION FOR THE PATIENT REFUSING CARE:

- ▶ Physical exam
- ▶ Evidence that the patient was alert, oriented and appropriate for their age
- ▶ Indications that there were no signs of significant impairment due to drugs, alcohol, organic causes, or mental illness
- ▶ Anything else that made you believe that the patient was mentally capable
- ▶ The fact that you offered treatment and transportation
- ▶ What you told the patient about the nature of the illness/injury and the specific risks of refusal for the medical condition. (Use "quotes" as appropriate)
- ▶ The indications that the patient understood these risks
- ▶ What the patient specifically said about why he/she is refusing treatment/transport. (Use "quotes" as appropriate)
- ▶ Your efforts to encourage the patient to seek care
- ▶ The person(s), if any, who remained to look after the patient (the patient's "support system")
- ▶ The name of the interpreter, if applicable

6. OTHER THINGS TO CONSIDER:

6.1 Other situations where a minor may consent to but may not refuse medical care include:

- ▶ A minor who is 12 years of age or older, for the treatment of drug or alcohol problems, or infectious, contagious or communicable diseases
- ▶ A minor of any age who is pregnant, for medical care related to the pregnancy
- ▶ At least 15 years old, living separate and apart from the parent/guardian and managing his or her own financial affairs

6.2 If the parent/guardian is unavailable consent/refusal of care may be obtained over the telephone. Document exactly as you would if the parent/guardian was present on scene. Verify the name and relationship of the individual to the patient. Attempt to have another person validate the consent/refusal with the parent/guardian. Document exactly what was said, use "quotes" as appropriate

6.3 If the patient is 18 or older but there is reason to suspect that the patient has been judged incompetent by a court and placed under a legal conservatorship, seek consent from the designated guardian

6.4 If the parent/guardian is unavailable and treatment can be safely delayed:

- ▶ Document thoroughly
- ▶ Attempt to reach the parent/guardian by phone. Do not release the child in the custody of a relative or friend unless that individual has been authorized by the parent/guardian to make medical decisions for that child
- ▶ Transport to a hospital or leave in the custody of a law enforcement officer.

6.5 If the parent/guardian is unavailable and treatment cannot be safely delayed:

- ▶ Treat and transport as necessary to prevent death or serious disability (implied consent)
- ▶ Document on the PCR to show that your treatment was reasonable and necessary under the circumstances

6.6 If the parent/guardian is available but refuses to consent for necessary, emergency treatment:

- ▶ Explain the risks of refusal
- ▶ Be persuasive and/or get help from family members, Base Physician or law enforcement
- ▶ Document the situation/statements by parent/guardian thoroughly on the PCR and complete an Alameda County EMS Refusal of Care form

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- 6.7 An individual under arrest or incarcerated is legally capable of consenting or refusing medical care
 - 6.8 The law presumes that an individual is competent to consent or refuse. The party alleging a lack of capacity has the legal burden of proving it. Document accordingly; anyone forcing treatment on an unwilling patient must be able to prove both the necessity of the treatment and the incapacity of the patient
 - 6.9 If you cannot complete the refusal of service log due to scene safety issues or upon the insistence of another agency, complete an unusual occurrence form and send it to the EMS Agency
7. REFUSAL OF SERVICE - applies to those persons who do not meet (see 2.1) the definition of a patient and are refusing all EMS services. The offer of an assessment and transport must be made and refused by the individual. BLS **and** ALS personnel may honor a refusal of service
- 7.1 The individual must meet all of the following criteria:
 - ▶ Does **not** have a complaint suggestive of potential illness or injury
 - ▶ Does **not** request evaluation for potential illness or injury
 - ▶ Does **not** have obvious evidence of illness or injury
 - ▶ Has **not** experienced an acute event that could reasonably lead to illness or injury
 - ▶ Is **not** in a circumstance or situation that could reasonably lead to illness or injury
 - 7.2 Actions:
 - ▶ Honor the refusal
 - ▶ Enter the individual's name on the "Refusal of Service log" and obtain a signature
 - ▶ Complete a PCR detailing circumstances of refusal of service
 - ▶ In an event where multiple people sign a Refusal of Service log, complete one PCR detailing the circumstances of that event (***not one for each patient***)

