

EMERGENCY MEDICAL SERVICES

OPERATING GUIDELINES – Pre-hospital Medical care directive: Patch requirement on all refusals



Salt River
Fire Department

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403.03

PURPOSE

To define the circumstances and situations where paramedics may accept a patient's refusal of treatment and/or transport

GENERAL STATEMENTS

It is the policy of the Scottsdale Healthcare Organization and a requirement of our base station medical directors that the medical personnel, EMT's and paramedics, of the Salt River Fire Department shall be required to contact medical control for **ALL** patients who wish to refuse medical advice, further evaluation and to be transported by the Salt River Fire Department to a local emergency department / hospital.

PROCEDURE

Once patient contact has been established:

- All patients who request transport to the hospital will be transported
- Any patient who complains of any pain, discomfort, or medical condition will have an assessment performed
- If the patient refuses an assessment, document the manner of the refusal and the patient's reason for the refusal in the report.
- Assessment should include all items referenced in the treatment algorithm related to the patient's complaint.
- In all cases, a refusal form will be filled out and signed by the patient and any family members present or appropriate consenting adult (if the patient is a minor).
- If the patient refuses to sign the form, document the reason and have a witness sign the form during any refusal and advise of the availability of transportation and the consequences of going against medical advise

- SRFD paramedics will then notify the base hospital and seek approval and/or any medical direction

WHO CAN REFUSE

- The patient must meet all of the following criteria:
- Is an adult (18 or over), or if under 18, is being released to a parent, legal guardian, or law enforcement personnel
- Is oriented to person, place, time, and event.
- Exhibits no evidence of: Altered level of consciousness or Alcohol or drug ingestion that impairs judgment
- Understands the nature of his/her medical condition, as well as the risks, and consequences of refusing care.
- An adult accepting care for a minor must sign the refusal form.
- Have vital signs within normal range.

High Risk Refusals:

Who Cannot Refuse Without An On-line Physician Order (High Risk Refusals)

On-line medical direction is required in the following situations in which a patient is refusing treatment and/or transport (high-risk refusals). On-line physician contact must be made before leaving the scene.

- Persons that have been stunned/stopped by means of an electro-muscular disruption weapon (i.e. TASER) Note: an ECG monitor strip must be evaluated and attached to the chart for any patient situation involving the use of a TASER.
- Persons that have been drinking alcohol or have a drug ingestion (by exam or history).
- Persons with a head injury (by exam or history)
- Pediatric patient with reported (does not have to be observed) ALTE (Apparent Life-Threatening Event). These events can involve any of the following: apnea, color change (cyanosis, pallor, erythema), marked change in muscle tone (limpness), choking or gagging.
- Persons that have been administered medications (including oxygen) by ALS Providers with or without relief of symptoms and now wish to refuse care
- Persons that are postictal
- Persons that cannot understand the consequences of their refusal
- Persons that do not speak/understand English (unless an interpreter is present)
- Persons that have, or appear to have, mental illness or mental retardation
- Minors that wish to be released to anyone other than parent or guardian. An adult accepting care for a minor must sign the refusal form.

- Persons with any of the mechanisms or conditions listed as high risk patients in the Arizona Trauma Patient Identification & Field Triage Decision Standard (and refusing treatment and/or transportation):
 - Falls
 - Adults: >20 ft. (one story is equal to 10 ft.)
 - Children: >10 ft. or 2-3 times the height of the child
 - High –risk auto crash Intrusion:
 - ➔ 12 in. occupant site; > 18 in. any site
 - Ejection (partial or complete) from automobile
 - Death in same passenger compartment
 - Vehicle telemetry data consistent with high risk of injury
 - Auto v. pedestrian/bicycle thrown, run over, or with significant (>20 mph) impact
 - Motorcycle crash >20 mph
 - Persons that have any characteristics or complaints:
 - Abdominal pain
 - Altered mental status (altered for patient)
 - Any acute cardiac dysrhythmia
 - Chest pain
 - Electrocutation
 - Foreign body ingestion
 - Inability to walk (not normal for patient)
 - Pediatric patients
 - Overdose or poisoning
 - Patient volunteers high-risk condition
 - Pregnancy-related complaint
 - Seizures
 - Syncope or near syncope
 - TASER
 - Water-related

Documentation

- Reports shall include:
 - Patient name, age
 - Date of birth (DOB)
 - Medical history
 - Two complete sets of vital signs
 - Chief complaint
 - Mental status exam findings (speech, gait, appropriate behavior, cooperative, follows instructions/commands)
 - Physical exam findings
 - Reason for refusal
 - Signed refusal form
 - Advice given
 - Patient understands risks of refusal

- Patient understands possible outcome if advice is not followed
- Decision making capacity
- Third party involvement

Refusal Form Signatures

- Witnessed by law enforcement officer, family member, or friend
- If a minor is refusing, adult accepting care for child must sign
- If patient/adult refuses to sign, get witnessed by police if possible