

## Policy and Procedures

*Title:* Patient Refusal Guidelines

*Date issued / last revision:* September 1, 2002

*Date effective:* Immediately

# Patient Refusal Guidelines

### *Statement:*

This policy has been established to provide guidelines to assist employees in utilizing the Refusal of Medical Treatment / Transport (RMA) dispositions.

### *Purpose:*

To reduce the number of RMAs currently being utilized, to provide assistance for employees when faced with potential RMAs, provides for an enhanced standard of care and to reduce potential liability to Cooperstown Medical Transport, Inc. (CMT).

### *Scope:*

This policy applies to all CMT employees, student interns, and observers.

### *Policy:*

1. RMAs should never be encouraged; every effort should be made to transport patient(s) to a hospital for evaluation.
2. **Patient(s) must have mental capacity to fully understand RMA and all potential consequences.**
  - a. Patient(s) must be alert and oriented x 3.
  - b. Patient(s) with a G.C.S. less than 15 cannot be granted RMA.
3. Patient(s) under the influence of alcohol or drugs should not be granted RMA. They pose a threat to themselves and others.
4. Psychiatric patients or patients who relate desire to harm themselves or others cannot be granted RMA. (i.e. suicidal or homicidal patients).
5. Special situations / patients:
  - a. Patient(s) who are considered wards of the state (i.e. mentally incapacitated or institutionalized / incarcerated patients), should be transported to a hospital. State law protects these patients.
  - b. Minors should at all times be transported for evaluation. **If a child is critically ill or injured they must be transported.**
    - i. Refer to *Treatment of Minors* policy.
  - c. A parent or legal guardian, including school officials, **cannot** deny their child medical care **if a life threatening situation exists**. The law prohibits this and protects the child. If care is denied, seek police assistance. This is, by state law, abuse, and the child must be placed in custody of the state. Police officers are mandated by law to do this
    - i. **A minor is defined as any patient under the age of 18 who is not emancipated by definition.** Refer to *Treatment of Minors* policy.

- d. Certain laws concerning abuse also protect the elderly. If an elderly person is unable to care for him or herself, they need to be seen at a hospital.
6. PCR documentation:
    - a. **At a minimum** one (1) full set of vitals. Additional sets when we have been with the patient(s) for an extended period of time.
    - b. Documentation must include a physical exam performed, with findings.
    - c. All efforts to convince patient to be seen should be clearly documented.
    - d. Documentation should relate that the patient fully understands consequences of their refusal and is mentally capable to accept them.
    - e. Have the patient sign the refusal section (white copy only), only after you have verbally read the refusal verbatim to the patient.
      - i. Have a witness sign the PCR, ideally a family member or bystander.
      - ii. Do not use individuals who are involved in the incident (i.e. other employees, fireman, other EMS, etc.).
    - f. **A refusal information sheet must be completed with a copy given to the patient and a copy filed with the PCR.**
    - g. In cases where minors exist, document what actions the crew attempted. Remember, if a school official or police agency is aware of the situation, they are required to act by law.
  7. If problems exist at any scene, contact a supervisor and write an incident report, especially if the problem is with another agency (i.e. school, police, fire agency, etc.).
  8. You are the medical authority at the scene. You have a moral and potentially legal obligation to provide quality pre-hospital care to the community we serve. You should at all time advocate for your patients.