

Western Regional Emergency Medical Advisory Committee

Title: Refusal of Evaluation/ Stabilization/Transportation Policy	Effective Date: February 1997 Page: 1 of 3
Policy #1997-1	Revised: May 2004

Policy:	<p>Refusal Of Evaluation/Stabilization/Transport Policy</p> <p>A. When EMS personnel are called to a scene, all persons for whom the call was made will be offered evaluation/stabilization and transport to an appropriate facility. An appropriate facility may be the closest, or one designated by REMAC transport policy, or one designated by MC.</p> <p>B. Patients have the right to refuse evaluation or stabilization or transport provided:</p> <ol style="list-style-type: none"> 1. They are alert, oriented, not intoxicated (drugs or alcohol), and appear to possess a capacity to make an informed decision; 2. They are not a danger to themselves or others. <p>C. If the patient does not appear to possess capacity to make an informed decision due to intoxication or head injury etc., or if the patient appears to be a danger to him/herself or others, the patient shall be transported. MC should be contacted. The police should be called to assist if the patient resists transport. The patient may be physically restrained using belts/straps/tape as necessary, but EMS personnel should not risk injury to themselves in a physical confrontation with the resisting patient. Restraints may be initiated by the police or may be ordered by MC. (See Restraint Policy)</p> <p>D. Vital signs should be obtained.</p> <p>E. The risk of refusal of evaluation/stabilization/transport, if known, should be described to the patient. It is understood that EMS personnel lack the benefit of training and diagnostic tools present in an Emergency Department and may be unable to fully access the illness/injury. Therefore, they may be unable to determine the potential risks to the patient.</p> <p>F. MC will be contacted when any of the following occur:</p> <ol style="list-style-type: none"> 1. Patient appears to lack capacity to make an informed decision (i.e., patient does not understand the risks involved); 2. Patient appears to be intoxicated with drugs or alcohol; 3. Patient appears to be a danger to him/herself, others, or property; 4. Patient has a head injury; 5. Patient has symptoms or signs which would require ALS care;
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	<p>6. Patient is < 18 years old</p> <p>7. The highest level of care treating the patient is a CFR</p> <p>G. The patient or legal representative should sign the refusal of evaluation/stabilization/transport form.</p> <p>H. The following should be documented:</p> <ol style="list-style-type: none"> 1. A PCR should be filled out to the extent possible, including: <ol style="list-style-type: none"> a. Vital signs b. Physical exam including general appearance and mental status. 2. If patient refused evaluation or stabilization, document specifically what was refused; 3. If patient refused transport, document the reason it was refused; 4. If police were notified, document agency and time (see Section C);
Procedure:	The patient or legal representative should be asked to sign a statement specifying what was refused and that the refusal might pose a threat to the health and safety of the patient. (See attached form)
Reference:	Western Regional EMS ALS Protocols

Refusal of Evaluation/Stabilization/Transport

PCR # _____

RUN # _____

I, _____ have been offered evaluation, stabilization, and transport by the
Emergency Medical Service. I refuse:

_____ Evaluation and/or stabilization
specify _____

_____ Transportation to the most appropriate health care facility
Reason _____

I understand this refusal may pose a risk to my health and safety.

Other risks: _____

Signature _____ Date _____

Relationship to patient _____

Witness _____ Relationship to patient _____

If you refuse transportation, you are strongly urged to seek medical treatment as soon as possible.