TITLE: PATIENT ABANDONMENT VS. PRUDENT USE OF EMS PERSONNEL

POLICY STATEMENT:

Patient abandonment occurs when there is termination by the physician (or his agency, i.e. the First Responder/EMT/Pre-hospital RN) of the doctor/patient (EMS/patient) relationship without consent of the patient and without allowing sufficient time and resources for the patient to find equivalent care. This is assuming, and unless proven otherwise, there exists a need for continuing medical care and the patient is accepting treatment.

GOAL/ PURPOSE:

To assure that pre-hospital abandonment of patients does not occur unless specifically defined conditions exist.

POLICY:

A. EMS personnel must not leave a patient if there is a need for continuing medical care that must be provided by a knowledgeable, skilled, licensed EMS provider unless one or more of the following conditions exist.
   • The patient or legal guardian refuses pre-hospital care and transportation. In this instance, follow the procedure as outlined in the “Patient Right of Refusal” policy.
   • Pre-hospital personnel are physically unable to continue care of the patient due to exhaustion or injury.
   • When law enforcement, fire officials or the EMS crew determine the scene is not safe and immediate life or injury hazards exist.
   • The patient has been determined to be dead and all policies and procedures related to death cases have been followed.
   • If medical control concurs with a DNR order.
   • Whenever specifically requested to leave the scene due to a specific overbearing need (i.e., disaster, triage prioritization).
   • Medical care and responsibility for the patient is assumed by comparably trained, certified and licensed personnel. Refer to “Physician/Nurse at Scene” policy and “Patient Hospital Preference” policy.

B. If EMS personnel determine that a continuing medical need does exist and the patient refuses care, the EMS crew shall establish communication with Resource Hospital Medical Control and request medical direction in determining the patient’s right to refuse. Refer to “Patient Right of Refusal” policy for the process to follow for refusal of care regardless of circumstances surrounding the refusal.

C. EMS personnel may leave the scene of an episodic illness or injury incident where initial care has been provided to the patient or securing a signed refusal, if the following conditions exist:
   • Delay in transportation of another patient from the same incident would threaten life or limb.
   • An individual or occurrence of a more serious nature elsewhere necessitates life-saving intervention which could be provided by the EMS crew and without consequence to the original patient.
• Definitive arrangements for the transfer of care and transportation of the initial patient to other appropriate personnel must be made prior to the departure of the EMS crew; and, the alternate arrangements, should, in no way, jeopardize the well being of the initial patient.

D. If the patient requests transportation to a hospital outside of the ambulance primary response area, and there exists no obvious need for stabilization at a nearer hospital, the EMS crew may make arrangements for transfer of the patient’s care to a more appropriate ambulance service. Alternate arrangements and release of the patient should be carried out with the approval of Medical Control. Whenever possible, the EMS crew should remain with the patient until the arrival of the transporting ambulance. The “Patient Right of Refusal” policy and “Patient Hospital Preference” policy should also be referenced in such cases. Consult your agency’s policies regarding transport of patient's out-of-district.

E. If the patient requests transportation to a hospital outside of the ambulance primary response area, and there exists obvious or potential need for stabilization at a nearer hospital, the EMS crew should immediately contact Medical Control and follow the directions of the Resource Hospital Physician. The “Patient Right of Refusal” policy and “Patient Hospital Preference” policy should also be referenced in such cases.