



McLean County Area EMS System

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Title of Policy: <i>Power of Attorney for Healthcare</i>	Policy Number: L-105
Effective Date: 10/2004	Review Date: 01/22/2017
Policy Area: Legal	Approvals: EMSSC, EMS MD

Background to Policy:

To provide direction to the EMS provider who may encounter a person (other than the patient) expressing treatment, refusal of treatment, and transport wishes in cases where the patient cannot express those wishes.

Policy Statement:

A Power of Attorney for Healthcare acts as an agent for a person who is unable to express decisions regarding healthcare. Within the following guidelines, EMS personnel may honor the wishes of the Power of Attorney for Healthcare.

Policy:

EMS personnel may honor the requests of a person purporting to be the patient's Power of Attorney for Healthcare when:

- A. The patient is unable to express his/her own wishes regarding treatment, transport or refusal of treatment/transport.
- B. EMS personnel are presented with a written Power of Attorney for Healthcare document. The document should list the name and signature of the Power of Attorney for Healthcare, the patient's name and signature, the date the document was signed, and any restriction to the authority of the Power of Attorney for Healthcare.
- C. EMS personnel must inform the Medical Control Physician of the presence of the Power of Attorney for Healthcare, the nature of the Power of Attorney for Healthcare document, the patient's condition (i.e., the inability to express his/her wishes), and the direction of the Power of Attorney for Healthcare. The Medical Control Physician must give direction as to whether to concur with the requests of the Power of Attorney for Healthcare.
- D. EMS personnel may not honor the request of the Power of Attorney for Healthcare to discontinue resuscitative efforts on a patient in cardiac arrest unless a completed DNR form is presented. The Medical Control Physician must be contacted for direction.

Resources:

1. [Illinois Statutory Short Form Power of Attorney for Healthcare](#)