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| B | Complete an initial assessment with particular attention to neurologic and mental status |
| | <ul style="list-style-type: none"> • Obtain a complete set of vital signs |

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| B | Determine patients ability to make informed medical decision concerning the extent of his/her illness or injury |
| | <ul style="list-style-type: none"> • Alert and oriented • Has the ability to understand the circumstances surrounding his/her illness or impairment • Understands possible risks associated with refusing treatment and/or transport. • Judgment must not be significantly impaired by illness, injury, or drug/alcohol intoxication. • No attempted suicide or verbalized intent of harm to self or others. |

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| B | Perform appropriate medical care with the consent of the individual |
| | Complete the patient care report clearly documenting the initial assessment findings and the discussions with all involved individuals regarding the possible consequences of refusing additional prehospital care and/or transportation. |

- Consider contacting medical direction for assistance when provider is concerned for:
 - Potentially life-threatening condition
 - Possible physical/psychological abuse
 - Doubts about whether the individual has capacity to refuse or other concerns related to risk of refusal

If verbalized intent or attempted self harm patient must be evaluated by qualified mental health professional or transported to an appropriate facility to receive evaluation



Education/Pearls

Decision-Making Capacity: An individual who is alert, oriented, and has the ability to understand the circumstances surrounding his/her illness or impairment, as well as the possible risks associated with refusing treatment and/or transport, typically is considered to have decision-making capacity. Decision-making capacity should be demonstrated and documented as defined by the presence of the following criteria. The patient must be able to:

- Receive and comprehend information needed to make a decision,
- Process and deliberate a decision and its potential consequences,
- Make and articulate a decision that is consistent over time,
- Justify that decision with logic that fits the individual's own value system.
- The individual's judgment must not be impaired by illness, injury, or clinically apparent drug/alcohol intoxication.

EMS providers should make all reasonable efforts to avoid danger to themselves.

Individuals must be advised of the risks and consequences resulting from refusal of medical care.

- Assess the patient's understanding of the medical emergency: the possible medical problems, the proposed medical care, the benefits of medical care and risks of refusal.
- Contact online medical direction based on local protocol.
- Document the patient encounter.

Pediatrics:

- It is preferable for a minor to have a parent or legal guardian who can provide consent for treatment on behalf of the minor. However, EMS providers may provide emergency treatment when a parent is not available to provide consent.
- **Minors cannot refuse care on their own behalf unless they have documentation of emancipation.**
 - **A parent or legal guardian must be contacted to refuse care for minor patients.**
- The provider should take additional means necessary to facilitate transport if abuse or neglect is suspected. Notify law enforcement as necessary to facilitate transport to the hospital.
- A DCS report should be made as required for suspected abuse or neglect.

Psychiatric illness:

- Patients may generally refuse EMS **medical** care even with petition for mandatory psychiatric evaluation.
- The only exception to this is patients with a revoked court order.