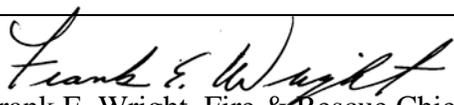


	STANDARD OPERATING PROCEDURES	
	SUBJECT	Refusal of EMS Services
	REFERENCE NUMBER	SOP-06-07
	EFFECTIVE DATE	January 1, 2006
	Signature of Approval	 Frank E. Wright, Fire & Rescue Chief

TO: All Fire and Rescue Personnel

FROM: Capt. Frank Moore

For some time there has been confusion for many EMS providers regarding the completion of the patient refusal (EMS Informed Consent to Refuse) portion of the Pre-hospital Patient Care Report. With this memorandum, I will address the questions and concerns for which I have been made aware.

Per the Rules and Regulations of the Board of Health, Commonwealth of Virginia, Governing Emergency Medical Services, a patient is defined as “a person who as a result of illness or injury needs immediate medical attention, whose physical or mental condition is such that he is in danger of loss of life or health impairment, or who may be incapacitated or helpless as a result of physical or mental condition.” With this in mind, a person will not be considered to be a patient if he or she *says that he or she has no illness or injury, if he or she appears to the provider to have no illness or injury, and if he or she answers questions appropriately*. If all three of these criteria are true, then the person is not a patient, and **no patient refusal is required for this person**.

Question #1: If a vehicle involved in a motor vehicle accident has multiple passengers, do I get a patient refusal for each who does not want to go to the ED?

No. The only persons from whom you will receive refusals will be those who say that they are injured or those you can see are injured. In order to legally be allowed to refuse treatment, these persons must be able to answer questions appropriately. Keep in mind that anyone who is unable to respond appropriately or who displays an altered level of consciousness, for any reason, does not meet the rules for informed consent. Therefore, this person must be urged by EMS to receive treatment, making the person a patient.

It is extremely important that all potential patients be contacted personally by EMS providers, and that each is considered per the criteria of the definition of “patient.” If there is any doubt whether someone is a patient, complete the EMS Informed Consent to Refuse portion of the PPCR.

Question #2: If there are multiple patients who refuse our services, is there anyway to list them all on one form?

No. There must be a form signed by each person who meets the criteria for a patient. In the near future, the Department will distribute an “EMS Informed Consent to Refuse” form, for use of all refusals. This form should significantly reduce the amount of paper used for the completion of refusals in multi-casualty incidents.

Question #3: Some people who sign refusals want a copy. How do I give them one?

The new “EMS Informed Consent to Refuse” form provides a second copy on NCR paper for this purpose. The original (white) copy will be retained by the EMS provider, and the second (yellow) copy may be given to the refusing patient. It is important to remember that this form is designed as documentation concerning the treatment, or refusal of treatment, for this patient. As such, no one can legally get a copy of the completed form except for the patient or, if the patient is a minor, the patient’s parent or legal guardian.

If a copy of the signed form is not requested by the refusing patient, the yellow copy shall be shredded and discarded upon arrival of EMS personnel back to their station.

Question #4: What is the minimum age at which a patient can sign a refusal form for himself or herself?

Effective July 1, 2000, the code of Virginia, Section 54.1-2969, was amended to allow a minor fourteen years of age or older who is physically capable of giving consent, the right to give consent or to refuse EMS services. This may be done only after an attempt has been made to obtain consent from the minor’s parent or guardian, and within a reasonable length of time under the circumstances of the incident.

A pregnant minor shall be deemed an adult for the sole purpose of giving consent for herself and her child to medical treatment relating to the delivery of her child. Thereafter, the minor mother shall also be deemed an adult for the purpose of giving consent to medical treatment of her child. However, the minor mother still is a minor, and an attempt must be made to obtain consent from her parent or guardian for any medical treatment to the minor mother not related to the delivery of her child.

Question #5: What if the patient refuses treatment and/or transport, but also refuses to sign the form?

No one can be forced to sign any form that we have. If this occurs, attempt to have someone else on the scene, hopefully someone not affiliated with EMS crew, sign the form as a witness. A notation shall be made and signed by the EMS provider that the patient refused to sign the form

Question #6: Do I need to obtain any more information than the patient's name?

Yes. As with any other patient, you must report the required information for a patient who refuses treatment and/or transport. This presently is accomplished by completing all applicable sections of the Pre-hospital Patient Care Report. This requirement comes from section 32.1-116.1 of the *Code of Virginia*, and is regulated through the Virginia Office of EMS.

Question #7: Can any operational member of the Department obtain patient refusals?

No. Only providers who are certified as an EMS provider through the Virginia Office of EMS are allowed to assess patients and complete the necessary reports for an EMS incident. Although members of the Department who are trained only in fire and/or hazardous materials may be on the scene, the EMS forms, refusals or otherwise, must be completed by EMS-certified personnel.

Hopefully this memorandum will provide guidance to all field personnel and reduce the potential for any conflict or confusion relating to this matter. Please do not hesitate to contact me with any further questions.