Medical, Legal, and Ethical Issues

Objectives

1-3 Identify basic facts and terms about the scope of practice for the EMT-B, ethical responsibilities, medicolegal directives and guidelines pertinent to the EMT-B, with at least 80% accuracy.

Objectives

- Scope of practice
- Advance directives
- Consent
- Assault/Battery

Objectives

- Refusals
- Abandonment
- Negligence
- Duty to Act

Objectives

- Confidentiality
- Special Situations
- Potential Crime Scene/ Evidence Preservation
- Special Reporting Situations

Scope of Practice

- A set of regulations and ethical considerations that define the scope, or extent and limits of, the EMT-B's job

Scope of Practice

- Defined by local/state legislation
- Contingent upon medical director
  - Telephone/radio communications
  - Protocols and standing orders
  - Responsibility to medical direction

Ethical Responsibility

- Make the physical and emotional needs of patients a priority
- Practice, maintain and improve skills

Ethical Responsibility

- Attend continuing education/refresher classes
- Critically review performances
- Honest reporting

Advance Directives

- A written document that specifies medical treatment for a competent patient should he/she become unable to make decisions
  - Do Not Resuscitate (DNR) Order

Department of Health

Nonhospital Order Not to Resuscitate (DNR order)

Person's Name (Print) _____

Date of Birth ___/___/___

Do not resuscitate the person named above.

Person's Signature _____

Date ___/___/___

Physician's Signature _____

Print Name _____

License Number _____

Date ___/___/___

It is the responsibility of the physician to determine, at least every 90 days, whether this order continues to be appropriate, and to indicate this by a note in the person's medical chart. The issuance of a new form is **NOT** required, and under the law this order should be considered valid unless it is known that it has been revoked. This order remains valid and must be followed, even if it has not been reviewed within the 90 day period.

Advance Directives

- Patients have the right to refuse treatment if they can communicate their wishes

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Advance Directives

- Written physicians order required
- WHEN IN DOUBT, RESUSCITATE

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Consent

- Expressed or Informed
  - Must be of legal age
  - Must be able to make rational decision
  - Obtained from every conscious, mentally competent adult

Consent

- Implied
  - Assumed that an unconscious patient would consent to lifesaving interventions

Consent

- Children and mentally incompetent adults
  - Consent for treatment must be obtained by parent or legal guardian
  - When life threatening situations exist, emergency treatment should be rendered based on implied consent

Assault/Battery

- Unlawfully touching a patient without their consent
- Providing emergency care when the patient does not consent to the treatment

Refusals

- Patient has the right to refuse treatment
  - May withdraw from treatment at anytime
- Must be mentally competent adults
- Must be informed of all risks

Refusals

- Must be informed of consequences of not receiving care
- When in doubt, give care
- Documentation is the key

Refusal Documentation

- Try again to persuade
- Ensure patient is competent
- Inform patient why they should go
- Call medical direction

Refusal Documentation

- Consider law enforcement assistance
  - Witness
- Document any assessment findings

Refusal Documentation

- Have patient sign refusal form
- Have witness sign refusal form

Abandonment

- Definition
  - Termination of care without assuring the continuation of care at the same level or higher

Negligence

- Deviation from the accepted standard of care resulting in injury to the patient

Negligence

- A finding of negligence requires ALL of the following to be proven:
  - Duty to act
  - Breach of duty
    - Did not provide standard of care

Negligence

- Physical or psychological injury
  - Due to standards not being met
- Actions of EMT caused the injury/damage

Duty to Act

- A contractual or legal obligation must exist
  - Implied
    - A patient calls
    - Treatment has begun

Duty to Act

- Formal
  - Ambulance service has written contract
- Legal duty to act may not exist

Confidentiality

- Confidential Information
  - Patient information gained through interview
  - Assessment findings
  - Treatment rendered

Confidentiality

- Releasing confidential information
  - Written release
  - When written release is not required

Special Situations

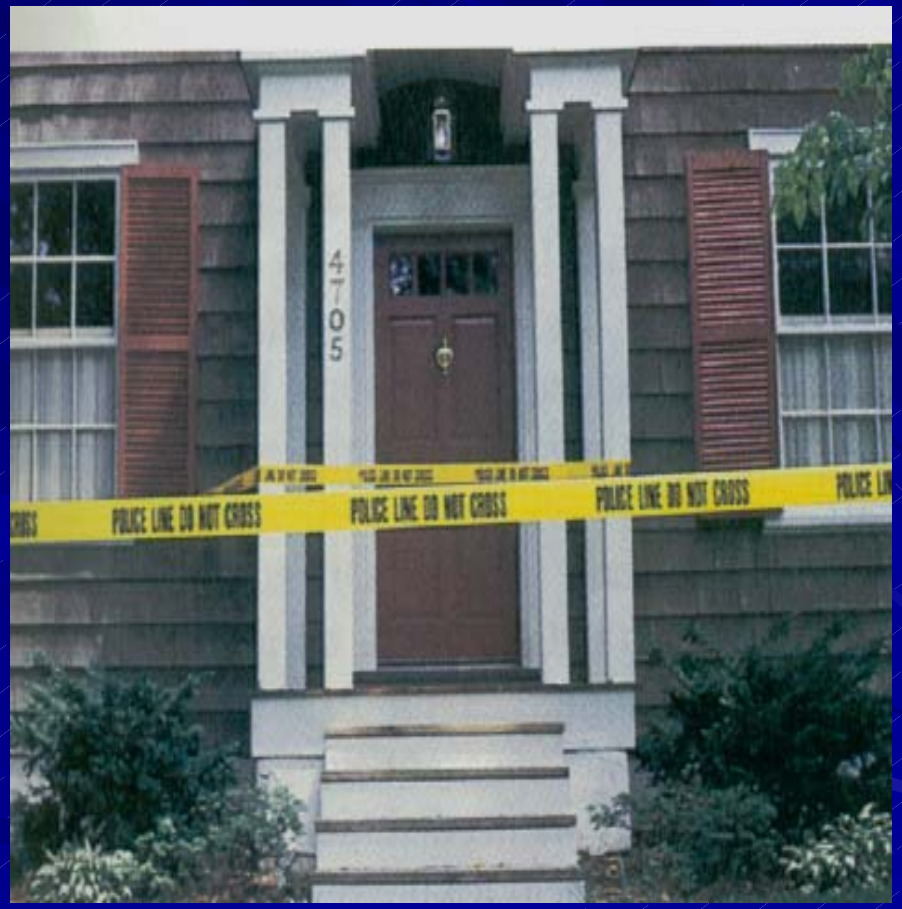
- Donor/organ harvesting consideration
  - Requires legal permission document
    - Cards
    - Bracelets
    - Drivers license
  - EMT role in organ harvesting

Special Situations

- Medical identification insignia
  - Bracelet
  - Necklace
  - Card
  - Indicates a serious medical condition of the patient

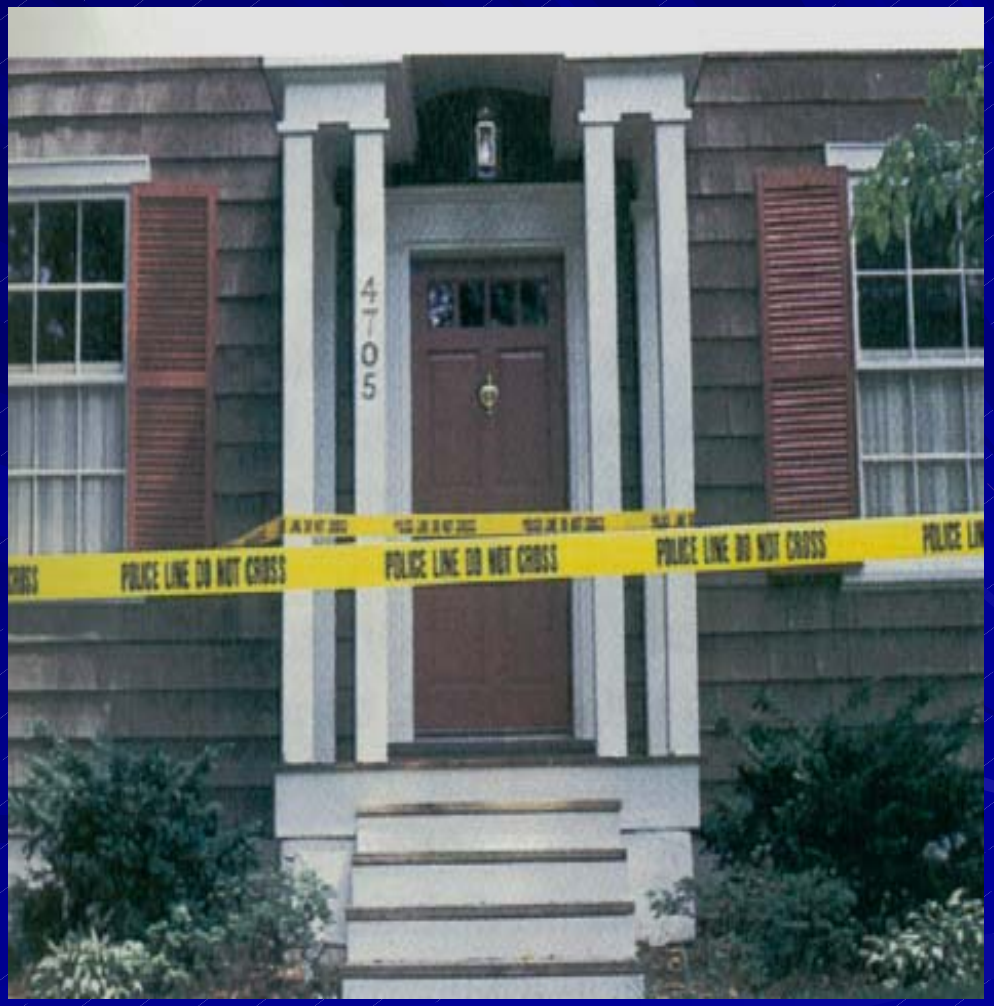
Potential Crime Scene/ Evidence Preservation

- IS THE SCENE SAFE TO ENTER ?
- Care after scene is safe



Potential Crime Scene/ Evidence Preservation

- Is there evidence to be preserved?



Special Reporting Situations

- Commonly required reporting situations
  - Abuse of children/elderly
  - Crime
  - Infectious disease exposure

Special Reporting Situations

- Commonly required reporting situations
  - Patient restraint laws
  - Mentally incompetent

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