

Medical, Legal, & Ethical Issues

Scope of Practice- the actions and care that are legally allowed to be provided by the EMT-B
Regulated by:

- State law
- Medical director
- Protocols
- Standing orders
- Medical control (on-line/ off-line)

Standard of Care- emergency care that would be expected to be given to a patient by any trained EMT-B under similar circumstances.

An EMT-B is judged against another who is/has

- The same training - similar experience
- The same situation - similar environments
- The same equipment
- Local customs
- Professional or institutional standards

Medical Practices Act- exempts EMS personnel from licensure requirements in most states.
EMT-B's are certified not licensed

Certification - process by which an individual or institution is evaluated and recognized as meeting certain predetermined standards.

Duty to Act - an individual's responsibility to provide patient care.

- Once a unit has started to respond they have a duty to act
- Off duty - the EMT does not have a legal duty to respond, but there may be moral or ethical duty
 - EMS license plates
 - EMT clothing

Contractual / Legal obligation

- Treatment begun on patient
- Written contract with organization

Negligence - failure to perform an important or necessary technique or performance of such a technique in a careless or unskilled manner so as to cause further injury

- 4 things that must be proven to prove negligence
 - An injury has occurred
 - The person accused of negligence had a duty to act
 - The EMT failed to act as another prudent EMT would have under similar conditions
 - Inappropriate action caused further injury

Abandonment- once treatment is begun, it can not be stopped until the patient is turned over to an equally or higher qualified provider or the patient refused treatment.

Consent- the provider must have the patients permission prior to doing an assessment of treatment

Expressed Consent- (actual consent)- the patient gives consent after being informed of the procedure including benefits and risks (informed consent)

- ❖ A word, nod or expression of consent
- ❖ Silence is not necessarily golden

Implied Consent- when the patient is unable to give actual consent, in an emergency situation, the law considers consent for care needed to prevent death or permanent physical impairment to be implied because the patient would have given consent if they were able.

Informed Consent – Patient must be informed as to what is being done to them.

Consent of Minors- Consent is obtained from the parents or guardian, in an emergency the consent is implied.

- Consent for treatment is given to minors in some states (14 in VA)
- Emancipated minors
- Married (can marry at age 12 with parental consent)
- Pregnant

Consent of the Mentally Incompetent

- Consent to treat can be given to any **competent** patient
- In the case of legally incompetent patient, the right of consent is given to a guardian or conservator

Forcible restraint- forcibly restraining a patient to the cot to prevent movement

- Can only legally performed by law enforcement personnel
- If medically necessary consult medical control

Assault- the unlawful placing a person in fear of immediate bodily harm without consent

Battery- unlawful touching of a person without consent

Right to Refuse- any competent person has the right to refuse or stop treatment at any time.

- When deciding the competency of a patient, the risks of *Battery* must be weighed against *Abandonment* or *negligence*
- When in doubt it is best to proceed with treatment
- Refusal of treatment must be informed
- Patients have the right to refuse treatment for any reason (religious, personal, etc)
- Parents have the right to refuse treatment of their children
- If in doubt call medical control or law enforcement

Good Samaritan Law- law that protects pre-hospital workers who acts in good faith, without compensation, without negligence, and within their training

- May administer epinephrine
- Does not apply to motor vehicle accidents involving EMS
- Police and fire / EMS salaries not compensation

Advance Directives- (Living Will) written document that specifies medical treatment for a Competent patient should he / she become unable to make decisions

- Can not be honored by EMS

Do Not Resuscitate (DNR, DDNR)- document giving the EMT permission not to resuscitate in the event of cardiac arrest

- ❖ Must be original document
- ❖ Must be properly displayed
- ❖ Must be signed by patient and physician
- ❖ If in doubt start resuscitation efforts and contact medical control

The Deceased- EMT's do not have the authority to declare someone dead

Obvious Death

- ✓ Rigor mortis
- ✓ Dependant lividity
- ✓ Decapitation
- ✓ Consumed by fire
- ✓ Obvious mortal wounds

Confidentiality - What happens on a call, stays on a call

- Communication between the EMT and the patient
- May only release information by subpoena, written release from patient. Or to another health care provider in the continuation of patient care

Medical Identification Insignia

- Used on identification bracelet, necklace, or medical card
- Identifies allergies illness or other medical conditions



Potential Crime Scenes

- Before entering a scene, the EMT must determine scene safety
- Patient care is the EMT's first priority, after personal safety
- In the event a crime had taken place, the EMT must try:
 - Not disturb the evidence
 - Observe and document anything unusual at the scene
 - When cutting clothes, avoid cutting through holes
 - Make drawing to record the patients position

Records and Reports

- If it is not written down, then it was not done!
- Incomplete or untidy reports are evidence of incomplete or inexperienced medical care
- PPCR is a legal document and your only proof of care given

Special Reporting Situations

- ✓ Child, elderly abuse- reports made in good faith
- ✓ Injury during a commission of a felony
- ✓ Drug related injuries (possession-vs-addiction)
- ✓ Childbirth
- ✓ Attempted suicide
- ✓ Animal bites
- ✓ Communicable diseases
- ✓ Assaults and rapes

Organ Donors- potential organ donors are not treated any differently than any other patient in the Pre-hospital setting

Ethical Responsibilities

- The EMT must strive to be at his / her best at all times
- Strive to improve performance through continued assessment and education
- Honesty in reporting

Good Samaritan Law

Federal and State Good Samaritan Laws exist to protect those who assist victims of an accident or crime and the victims themselves. A summary of the Minnesota Statute is found below.

1. **Duty to Assist:** A person at the scene of an emergency who knows that another person is exposed to or has suffered grave physical harm shall, to the extent that the person can do so without danger or peril to self or others, give reasonable assistance to the exposed person. Reasonable assistance may include obtaining or attempting to obtain aid from law enforcement or medical personnel. A person who violates this subdivision is guilty of a petty misdemeanor.

2. **General immunity from liability:** A person who, without compensation or the expectation of compensation, renders emergency care, advice, or assistance at the scene of an emergency or during transit to a location where professional medical care can be rendered, is not liable for any civil damages as a result of acts of omissions by that person in rendering the emergency care, advice, or assistance, unless the person acts in a willful and wanton or reckless manner in providing the care, advice, or assistance. This subdivision does not apply to a person rendering emergency care, advice, or assistance during the course or regular employment, and receiving compensation or expecting to receive compensation for rendering the care, advice, or assistance.