

Patient Refusals – Danger Ahead

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The Refusal Process

- Why are refusals dangerous for EMS
- What are the steps involved in *properly* and *safely* handling a refusal
- What are the communication tools and techniques to accomplish that goal
- What are the legal requirements that must be satisfied

The Refusal Process

- Your Approach to the call
- Step 1: Patient assessment
- Step 2: Convincing the patient
- Step 3: Test for competency
- Step 4: Signing the refusal form
- Step 5: Advice to the patient

Your Approach to the Call

- The right frame of mind...this is not an easy, wrap-it-up-quick kind of call
- How do you present yourself?
- Tone of voice
- Body language
- Is it evident that you are a caring professional?
- Is it evident that you are annoyed/disgusted/inconvenienced?
- Don't put the patient on the defensive
- Be prepared to spend the necessary amount of time

Step 1: Patient Assessment

- Normal questioning / investigating of patient's condition
- HPI
- History, Meds , Allergies
- Last meal, ETOH, drugs
- Physical head-to-toe exam
- Vitals (a full set *and* more than one set)
- EKG, SpO2, Accu Check

Patient Assessment – What if they won't let you touch them

- Still try *“Well how about we just check you out here before we go.”*
- Diligence on your part to obtain a physical exam *“You don't have to go the hospital if you don't want to, we just want to check you and make sure everything is okay.”*
- Diligence to just examine the affected area *“Let's just take a look at your stomach and make sure there's no serious bruises or anything.”*
- Cursory or limited exam
- Verbal only exam
- Visual only exam

Patient Assessment – why is it so important?

- *Wright v. City of Los Angeles* 268 Cal.Rptr 309 (Cal.App.2 Dist) 1990

“...paramedics arriving at the location of a fight and finding a patient lying on the ground have duty to make an examination which is sufficient to determine whether the patient has symptoms of any serious injuries which may likely result from fight.”

Patient Assessment

- Furthermore...

A paramedic faced with such a situation is *expected to foresee* that failure to perform such an examination could result in “failure to ascertain that a serious injury may exist” and that failure to provide treatment for such injuries can then result in worsening injuries or death

Step 2: Convincing the Patient

- Don't give them opportunity to refuse
 - Don't *offer* refusal of services as an option
 - Put the burden of initiating the refusal on *them!*
 - Don't purposefully try to talk them out of going
- Remain friendly and professional
- Don't be confrontational
- Assure the patient that you are looking out for their best interest (you are the patient's advocate)

Convincing the Patient

- All patients should be offered the opportunity of transport to medical care
- Make repeated attempts to get pt to go to hospital - make them refuse you 3 times (3 strike rule)
- Make repeated explanations of what you suspect the illness/injury is
- Make repeated explanations of risks of not seeking medical attention

Convincing the Patient

- Sales pitch
- Foreseeability of risk or harm to the patient
 - We are the medical experts and have the foreseeability that failure to assess and treat can result in worsening or death
 - The patient is not a medical expert and is not expected to understand their illness/injury and not expected to foresee consequences of not seeking treatment
- Needs to be an informed decision on the part of the patient
- Patient needs to understand the nature of their illness/injury or risk of (potential for) illness/injury
- Understands the possible consequences of delaying treatment of refusing transport
- Be sure you explain it slowly and in *terms that they can understand*

Coercing the Patient

- Slowly turning up the heat
 - Change to a more concerned tone of voice
 - Change to a more serious tone of voice (without being rude or confrontational)
 - Change to a more blunt tone of voice (this is a last resort)
 - Guilt: *“Do it for your family”*
- Let some one else take a try
 - Your partner
 - The family, friends, RA, Dean
 - Campus security, police
 - Medical Command

Step 3: The Test for Competence

Is the patient competent (i.e., of legal sound mind and body) to refuse treatment?

Competence

- Legal Capacity
- Mental Capacity
- Medical Capacity

Legal Capacity

- Are they legally allowed to give consent (or non-consent, i.e., a refuse) for medical treatment?
- Who can give medical consent or non-consent (refuse):
 - Person over the age 18
 - Adjudication of incapacity (has a court appointed legal guardian)
 - Emancipated minors

Emancipated Minors

- Minor living on their own
- Graduated from high school
- In the military
- Pregnant or the mother of a child
- Married

If you have any questions or concerns about the patient's *legal* capacity to give consent/refuse ...
contact Medical Command

Mental Capacity

- Are there any *mental* symptoms or conditions that would impair their cognitive ability to:
 - Understand the nature of their illness/injury
 - Understand the consequences of delaying or refusing treatment
 - Make clear and rational decisions

Mental Capacity

- Alzheimer's Disease
- Organ Brain Syndrome
- Senile Dementia
- Known psychotic disorder (not in touch with reality)
- Disoriented to person, place, or time
- ETOH or drugs (odor/evidence of, pt admits use)
- Slurred speech
- Unsteady gait

If you have any questions or concerns about the patient's *mental* capacity ... contact Medical Command

Medical Capacity

- Are there any *medical* symptoms or conditions that would impair their cognitive ability to :
 - Understand the nature of their illness/injury
 - Understand the consequences of delaying or refusing treatment
 - Make clear and rational decisions

Medical Capacity

- Head injury
- Evidence of a head injury
- Altered level of consciousness
- Abnormal pupils
- Severe SOB (hypoxia)
- Abnormal SpO₂
- Hypoglycemia

If you have any questions or concerns about the patient's *medical* capacity ... contact Medical Command

Also Lacks Capacity:

- Language barrier (impairs their cognitive ability to understand...)
- Danger to self or others (suicidal gesture, intoxicated, would not be safe if left alone, etc.)

Summarize...so far:

- Approached with a professional frame of mind
- Performed a complete pt assessment
- Functioned in the pt's best interest (advocate)
- Multiple attempts convince pt with adequate explanations
- Satisfied legal, mental, and medical capacity

Step 4: Signing of the Refusal Form

- Use the refusal form as a checklist to assure you've covered all the bases
- Explain that it is their legal right to refuse against your medical advice
- Explain that you will complete a written patient care report that enumerates that:
 - We assessed you
 - We advised you what we believe is the problem and recommended you seek medical attention
 - We explained the consequences of refusing medical attention
 - That you understood these consequences and still refused treatment/transportation

Signing of the Refusal Form

- Have the patient read the form
- Better yet - read it to them – explain/clarify each paragraph
- Have them sign the form
- Have someone witness the form
 - Your partner
 - Family, friend, roommate, RA
 - Police officer, campus security

...But the job's not done

Step 5: Alternatives and Advice

Always offer the patient and family alternatives for seeking medical attention and advice on what to watch for

Alternatives:

Helps to ward off abandonment

- Encourage patient to seek medical even if it's not with you. Even if it's not right this minute
- Encourage them to go to ER on their own
- Encourage them to go to campus infirmary
- Encourage them to go to their own physician
- Encourage them to at least call their own physician or their parents
- Don't hesitate to summon EMS back if condition gets worse or if they change their mind!

Advice

- Advise patient/roommate/friends of signs and symptoms to watch for
- Advise (with caution) patient on steps they can take to treat on their own
- Again advise patient and friends they can always call EMS back or call 911 directly if things get worse
- Does patient or friends have any questions?

Documentation of the Refusal

A recipe with all the ingredients

The Recipe

- Thorough Assessment
- Multiple attempts to convince patient
- Explanation of injury/illness
- Explanation of consequences of refusing
- Legal, Mental, and Medical Capacity are satisfied in the assessment
- Reading and explanation of refusal form
- Form signed and witnessed
- Alternatives offered
- Advice offered
- Patient understands and has no questions

Document a Thorough Assessment

- HPI (w/ pt quotes is good)
- History, meds, allergies
- Last meal, ETOH, drugs
- Head-to-toe physical exam
- Vitals (critical to have more than one set)
- EKG, SpO₂, Accu Check as appropriate
- Make it painfully clear that a complete and thorough assessment was performed
- In the case of “won’t let you touch them”, that more than one attempt was made to assess the patient

Document Attempts to Convince

- Multiple offers or attempts to transport pt to definitive medical care
- Document 3 strike rule
- Pt's response to attempts – use quotes!
- Document if belligerent or uncooperative
- Explanation of illness/injury and that the pt understands
- Explanation of consequences and risks (specifically list the risks you mentioned) of refusing and that pt understands

Document Capacity to Refuse

- Legal - is 18 or emancipated minor situation is explained
- Mental/Medical - pt assessment and physical exam clearly demonstrate there are no symptoms or conditions that might impair the patients cognitive ability to understand the nature of their illness *and* make clear an rational decisions

Document Signing of Form

- Document that you read the form to the patient and that they understood and had no questions
- Document that they signed it and who witnessed it.

Advice and Alternatives

- Document what alternatives you gave the pt – specifically list them
- Document specific advice you gave patient
- Document that you told them not to hesitate to call EMS back or call 911 directly
- Document that the patient understands and whether they had any questions

To Summarize

- Start with the right attitude and approach
- Step 1: Thorough and complete patient assessment
- Step 2: Time and effort to convince patient of the need for medical attention
- Step 3 Legal, Mental, and Medical capacity is satisfied
- Step 4: Refusal Form properly read, understood, and signed
- Step 5: Alternatives and advice
- Careful and clear documentation of your thorough efforts in all 5 of these areas