



**Universal Care:
REFUSAL OF CARE OR TRANSPORT
Practice Guideline**

Patient Care Goals:
***Protect patient autonomy while ensuring safety

Patient Presentation:
Inclusion Criteria

Decision-Making Capacity indicates an individual who is alert and oriented, has the capacity to understand the circumstances surrounding his/her illness or impairment as well as the possible risks associated with refusing treatment and/or transport, and can communicate their decision.

The individual's judgment must not be **significantly impaired** by illness, injury or drugs/alcohol intoxication.

Individuals who have attempted suicide, verbalized suicidal intent, or have other factors that lead EMS providers to suspect suicidal intent, should not be regarded as having decision-making capacity and may not decline transport to a medical facility.

Adult Patient: *For this guideline, someone who is 18 years of age*

Emancipated minors can make decisions regarding their healthcare. An 'emancipated minor' means a minor who is or has been married; a minor who has previously given birth; or a minor who has been legally freed from the care, custody and control of her parents, with little likelihood of returning to the care, custody and control prior to marriage or prior to reaching the age of majority.

Quality Improvement:
Key Documentation Elements
1. Capacity for decision-making.
2. Elements of refusal/transport checklist are captured in documentation and signed by patient or their guardian.

Patient Safety Considerations:
EMS should not be endangered by attempting to treat/transport an individual who refuses care; ensure police, chemical and physical restraint as needed.

OLMC if any concerns or confusion proceeding through the guideline

