Southern Illinois Regional EMS System

A-3 ON SCENE PHYSICIAN OR NURSE RESPONSIBILITY

ALS/ILS/BLS/EMR

- If a professed, duly licensed, medical professional (physician, dentist, or nurse) hereinafter
 collectively referred to as a physician, is not the patient's private physician, the advanced
 EMT may allow such a person to assist and/or perform specific requirements medical
 functions to aid the patient at the level of their licensure/certifications, i.e. start I.V., perform
 CPR, intubation, etc. The EMT should contact Medical Control and inform the on-duty
 physician or ECRN of the assistance of the on-scene MD or RN.
- If the physician has properly identified his/herself and is not the patient's private physician
 and whishes to direct total care, he/she must agree in advance to assume legal responsibility
 for the patient and must accompany the patient to the hospital in the ambulance. The onscene physician must sign the system approved form stating that he/she will assume total
 responsibility.
- Even under these circumstances, if such physician gives orders while on scene or enroute for procedures or treatment to the EMT that he/she feels to be unreasonable, medically inaccurate, and/or not within the EMT's skill capabilities, the EMT should refuse to follow such orders and communicate with medical control and transfer responsibility for the patient's care to the EMS qualified emergency physician at that facility. The EMT, in all circumstances, should avoid any orders or procedures issued by an on-scene physician that would be harmful to the patient.
 - Because the responsibility of the patient rests within the EMS qualified emergency physician at Medical Control, the ED physician's orders shall be followed.
- If an on-scene physician identifies themselves, is not the patient's private physician, and
 obstructs efforts of the EMT's to aid a patient for whom they are called, or who insists on
 rendering care inappropriate to system standards for the circumstances and resists all efforts
 to function appropriately to the point where continued intervention will result in obstruction of
 rendering good and reasonable care, the EMT should:
 - Communicate the situation to medical control.
 - One EMS team member should divert the interfering on-scene physician while the other EMS team member attends to the patient and also attempt to call for police.
 - Police should be requested to restrain the involved physician so that the EMS member can continue to provide patient care according to system protocol.
 - Behavior of on-scene physician should be documented on the patient care report and immediately forwarded to EMS Coordinator/EMS MD of the Resource Hospital.
 - o Complete an unusual occurrence form and submit to the EMS Coordinator.
- An on-scene physician, not the patient's private physician, does not automatically have the authority or control of the scene.

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A-3 ON SCENE PHYSICIAN OR NURSE RESPONSIBILITY (continued)

- If the patient's private physician is on the scene and wishes to direct total patient care, he/she must agree in advance to assume legal responsibility for the patient and sign the patient care report. The EMT should contact medical control and inform them of the situation and receive authorization to relinquish responsibility of the scene to the physician.
- The EMTs should comply with all medical orders issued by the private physician as long as
 they are reasonable, medically accurate and within their skill capabilities. If the private
 physician gives orders that the EMTs feel to be unreasonable, medically inaccurate and/or
 not within their skill capabilities, the EMTs DO NOT HAVE TO PERFORM IN A MANNER
 THEY KNOW BY THEIR TRAINING, SKILL, AND EXPERIENCE WOULD BE
 DETRIMENTAL OR HARMFUL TO THE PATIENT AND MAY REFUSE SUCH ORDERS.
- Aviod arguments/confrontations with the on-scene physician.
- Prepare to transport. Quickly assess the patient in the ambulance, contact Medical Control/receiving facility and explain the situation. If the patient's condition changes while enroute to the hospital, responsibility for patient care is assumed by Medical Control with which voice contact has been established or written system protocol if voice contact cannot be established.

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Thank you for offering your assistance. Be advised these EMTs are operating under the authority of Illinois Law and the Southern Illinois Regional EMS System. No physician or other person may intercede in patient care without the Medical Control emergency department physician on duty at the base station relinquishing responsibility of the scene by radio or telephone. If responsibility is given to a physician at the scene, that physician is responsible for any and all care given at the scene of the incident and enroute to the hospital, and must sign the medical record.

Thank you,		
Joseph R. Haake, MD EMS Medical Director		
MD assuming responsibility at the s	scene	
Patient Name		
Crew Member Signature		
Date		

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