PROCTOR HOSPITAL
Title: Transfer and Termination of Patient Care Policy

SCOPE:  Departmental  Organizational

POLICY:  Transfer and Termination of Patient Care Policy

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Patient abandonment occurs when there is termination of the caregiver/patient relationship without consent of the patient and without allowing sufficient time and resources for the patient to find equivalent care. This is assuming, and unless proven otherwise, there exists a need for continuing medical care and the patient is accepting the treatment.

EMS personnel must not leave or terminate care of a patient if a need exists for continuing medical care that must be provided by a knowledgeable, skilled and licensed EMS provider unless one or more of the following conditions exist:

1. Appropriate receiving hospital personnel assume medical care and responsibility for the patient.
2. The patient or legal guardian refuses EMS care and transportation (In this instance, follow the procedure as outlined in the Patient Right of Refusal Policy).
3. EMS personnel are physically unable to continue care of the patient due to exhaustion or injury.
4. When law enforcement personnel, fire officials or the EMS crew determine the scene to be unsafe and immediate threat to life or injury hazards exist.
5. The patient has been determined to be dead and all policies and procedures related to death cases have been followed.
6. If Medical Control concurs with a DNR order.
7. Whenever specifically requested to leave the scene due to an overbearing need (e.g. disasters, triage prioritization).
8. Medical care and responsibility for the patient is assumed by comparably trained, certified and licensed personnel in accordance with applicable policies.

If EMS personnel arrive on scene, establish contact and evaluate a patient who then refuses care, the EMS crew shall conduct termination of the patient contact in accordance with the Patient Right of Refusal Policy and Online Medical Control Policy.
EMS personnel may leave the scene of an illness or injury incident, where initial care has been provided to the patient and the only responsibility remaining for the EMS crew is transportation of the patient or securing a signed refusal, if the following conditions exist:

1. Delay in transportation of another patient (i.e. trauma patient) from the same incident would threaten life or limb.
2. An occurrence of a more serious nature elsewhere necessitates life-saving intervention that could be provided by the EMS crew (and without consequence to the original patient).
3. More appropriate or prudent transportation is available.
4. Definitive arrangement for the transfer of care and transportation of the initial patient to other appropriate EMS personnel must be made prior to the departure of the EMS crew. The alternate arrangements should, in no way, jeopardize the well-being of the initial patient.

During the transport of a patient by ambulance, should the EMS crew come across an emergency requiring ambulance assistance; the local EMS system will be activated. Crews involved in the treatment and transportation of an emergency patient are not to stop and render care. The priority is to the patient onboard the ambulance.

In the event you are transporting the patient with more than two (2) appropriately trained prehospital personnel, you may elect to leave one medical attendant at the scene to render care and the other personnel will continue to transport the patient to the receiving facility.

In the event there is not a patient onboard the ambulance and an emergency situation is encountered requiring ambulance assistance; the crew may stop and render care. However, the local EMS agency should be activated and their jurisdiction respected.