

HEMS SYSTEM

SCENE AND PATIENT MANAGEMENT POLICY

Date: April 2013, March 8, 2018
Last Revised Date: 1/3/2024

Section: 8-19 (S)

Scene and Patient Management Policy

Public Act 368 of 1978 (as amended), Section 20967

1. Authority for the management of a patient in an emergency is vested in the licensed health professional or licensed emergency medical services personnel at the scene of the emergency who has the most training specific to the provision of emergency medical care. If a licensed health professional or licensed emergency medical services personnel is not available, the authority is vested in the most appropriately trained representative of a public safety agency at the scene of the emergency.
2. When a life support agency is present at the scene of the emergency, authority for the management of an emergency patient in an emergency is vested in the physician responsible for Medical Control until that physician relinquishes management of the patient to a licensed physician at the scene of the emergency.
3. Authority for the management of the scene of an emergency is vested in appropriate public safety agencies. The scene of an emergency shall be managed in a manner that will minimize the risk of death or health impairment to an emergency patient and to other individuals exposed to the more serious remediable risks to life and health. Public safety officials shall ordinarily consult emergency medical services personnel or other authoritative health professionals at the scene in the determination of remediable risks.
4. If an emergency has been declared, the declaration that an emergency no longer exists shall be made only by an individual licensed under this part or a health professional licensed under article 15 who has training specific to the provision of emergency medical services in accordance with protocols established by the local Medical Control authority.

If multiple licensed life support units are present at a scene, the first arriving life support unit of the highest level of care present will be responsible for establishing medical command and assuring that On-Line Medical Control is accessed.

Life support service(s) arriving on scene will assess the patient to determine the appropriate level of care, then will initiate transport of the patient at that level of care.

The EMS response configuration to an emergency should be based upon resources available in the community as outlined in the Dispatch Guidelines (refer to Medical Dispatch Plan).

Life support units requesting back-up assistance **MUST** be advised of ETA and location and level of the responding life support unit at the time of the request.

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A person who receives any intercepted public safety radio communication shall not utilize the contents of the communication for the purpose of initiating an emergency medical service response without the authorization of the sender.

Any altercations between ambulance companies or EMS personnel at the scene of a medical emergency will result in immediate investigation and possible suspension of medical control privileges.

Physician on scene – Authority for the management of an emergency patient is vested in the physician responsible for Medical Control, until that physician relinquishes management of the patient to a licensed physician at the scene. In addition, this physician must be willing to accompany the patient to the hospital, and sign the ambulance report form. (Also see Protocol for Helicopter Utilization).

The EMS provider may accept assistance and/or advice of the on-scene physician provided they are consistent with medical control protocols. The assistance of an on-scene physician may be provided without accepting full responsibility for patient care, as long as there is ongoing communications and approval by the medical control physician. The medical control physician may relinquish control of the patient to the on-scene physician provided the on-scene physician agrees to accept full responsibility for the patient. Full responsibility includes accompanying the patient to the hospital and completing a patient care record. The EMS personnel should encourage the on-scene physician to communicate with the on-line medical control physician.

The medical control physician may reassume responsibility of the patient at their discretion at any time.