

SACRAMENTO REGIONAL MEDICAL RESERVE CORPS



EMERGENCY CARE/REFUSAL of CARE

MRC personnel must attempt to obtain as thorough a history and patient assessment as possible so that the patient who refuses medical evaluation and treatment has an opportunity to make an informed decision on refusing care. Careful documentation is required whenever care is refused.

Ensure the following

- The patient must be oriented to person, place, and time
- There are no signs of significant impairment due to drugs, alcohol, or mental illness
- Vital signs are normal
- Patient has a reasonable understanding of the diagnosis and the risks of refusing treatment

MRC personnel must ensure that the instructions given to the patient and /or family members present willing to take responsibility for the patient's care are clearly understood.

- A reasonable plan of action should the patient's condition deteriorate
- How to activate EMS if the patient wishes to seek medical evaluation and transport
- The patient should be encouraged to seek medical follow-up



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REFUSAL of CARE/Patient Care Report

Patient Name(Last, First, Middle)					Date	<u>5</u>	<u>Time</u>	
Location patient found					Presenting Complaint			
<u>History</u>					Reason for Refusal			
<u>VITAL SIGNS</u>								
TIME					Mental Status			
В/Р					Alert and C	riented to	person,place,time	
PULSE					Confused	Combativ	e Uncooperative	
RESP					SOB		Accessory Muscle RR	
TEMP						Pt. Not	t a risk to others	
P.OX					□ YES		nder the influence	
PAIN	0 1 2 3 4 5 6 7 8 9 10				Consequences of refusal reviewed			
B/S					□ YES		NO	
MRC Medical/Supervising Officer				Police on scene(if applicable)				
Witness			١	Witness				

MRC Medical/Supervising Officer	Police on scene(if applicable)
Witness	Witness

SRMRC Form 08, rev (Dec 05)