

Peoples' Medical Response Program

**“COMMUNITY FIRST
RESPONDER”**

(C.F.R.) a 48 Hours Basic Training

C.F.R. MODULE

UNIT THREE

ON MEDICAL LEGAL ETHICS





What are Medical Legal Ethics?

“The legal and ethical concerns of how practitioners conduct their trade in relation to the good of the patient and the law of the society.”



What is Scope of Practice?

- Defined by State Law
- Outlines care you can provide
- Further defined in protocols and standing orders
- Authorized through online and off-line medical direction
- **DO NOT GO beyond your scope of practice**





What is Standard of Care?

- **The Standard of Care is based off what a similarly trained and experienced provider would have done in a similar situation.**
- **Standard imposed by the law**
 - May be imposed by statutes, ordinances, administrative guidelines, or case law
 - Professional or institutional standards
 - Recommendations published by organizations and societies
 - Specific rules and procedures of your service or organization



Duty to Act

- Individual's responsibility to provide patient care.
- Responsibility to provide care comes from either statute or function.
- Legal duty to act begins once an ambulance responds to a call or treatment is initiated.
- No legal duty to act when off duty
- But EMS commonly act anyway

The background is a dark blue gradient with a complex network of thin, glowing green and yellow lines and dots, resembling a digital or neural network. The lines are interconnected, forming a web-like structure that fills the entire frame. The dots are small, bright points of light, some of which are clustered together, creating a sense of activity and connectivity. The overall effect is a high-tech, futuristic aesthetic.

DUTY TO ACT

What is Negligence?

“An act or omission (failure to act) by a **medical** professional that deviates from the accepted **medical standard of care.**”

Negligence

According to Jay M. Feinman of the Rutgers University School of Law:

“The core idea of negligence is that people should exercise reasonable care when they act by taking account of the potential harm that they might foreseeably cause to other people.”

Negligence is categorized into 3 subtypes:

- 1. Misfeasance- making a mistake such as giving a patient a medication they allergic to**
- 2. Nonfeasance- not performing a task that the patient needs in order to preserve life**
- 3. Malfeasance- the worst type of negligence, doing the wrong thing on purpose in order to cause the patient harm**

What criteria determines negligence?

- **Duty**
 - Responsibility to act reasonably based on standard of care
- **Breach of duty**
 - Failure to act within expected and reasonable standard of care
- **Damages**
 - Physical or psychological harm created in a noticeable way
- **Cause**
 - Existence of reasonable cause and effect.

All four must exist for negligence to apply.

What is Abandonment?

- Termination of care without patient's consent
- Termination of care without provisions for continued care
- Care cannot stop unless someone of equal or higher training takes over. Unless there is a clear danger to the provider.



What is Consent?

Different Types of Consent:

- Expressed consent
- Implied consent
- Minors
- Mentally incompetent adults
- EDPs/EDs/Mentally ill



Assault & Battery

- Assault
 - Unlawfully placing a person in fear of immediate bodily harm without consent.
- Battery
 - Unlawfully touching a person.
- It is assault & battery to take a patient w/o consent.



Right to Refuse Treatment

- Mentally competent adults have the right to refuse care.
- Emancipated Minors have the right to refuse care.
- Patients must be informed of risks, benefits, treatments, and alternatives.
- The EMT-B should obtain a signature and have a witness present, if possible.

Good Samaritan Laws

- These Laws Cover civilian attempts to save lives before the arrival of uniformed prehospital care providers.
- Based on the principle that you should not be held legally liable when assisting another in good faith.
- They cover lay people and EMS providers off duty.
- Must be acting within the scope of your training level.



Advance Directives

- Specifies the medical treatments desired if a patient is unable to make decisions.
- Do Not Resuscitate (DNR) orders
 - Patients have the right to refuse resuscitative efforts.
 - Require a written order from one or more physicians
 - When in doubt, begin resuscitation.
- **Living Wills and Medical Orders Life Saving Treatment**

“Consent” or “Implied Consent”

Informed/Expressed Consent:

Someone verbally gives you consent to treat them.

You are able to explain and they are able to comprehend the care you are rendering.

Implied Consent

When a patient is not able to give consent and a reasonable person would want care.

The patient is sick or injured and is a minor. When parents/guardian can not be contacted.

Ethical Responsibility

- Make the physical/emotional needs of the patient a priority.
- Practice/maintain skills to the point of mastery.
- Critically review performances.
- Attend continuing education/refresher programs.
- Be honest in reporting.
- Promote public health education & human rights



Confidentiality

- Information received from or about a patient is considered confidential, it cannot be shared except in continuing continuity of care. (HIPAA)
- Disclosing information without permission is considered a breach of confidentiality.
- Patient information can only be disclosed if the patient signs a written release.



Records and Reports

- Complete documentation is a safeguard against legal future complications.
- If an action or procedure is not recorded, courts assume it was not performed.
- An incomplete or untidy report is considered evidence of incomplete or inexpert care.
- **Document, *Document*, DOCUMENT.**


Witnessing Healthcare Crime

- Billing for unnecessary procedures.
- Theft from the patient.
- Soliciting or accepting tips or gratuities for service.
- Stealing medications or equipment.
- Enabling co-worker misconduct.
- Physically assaulting patients.



The Business Side

- **Healthcare is an enormous and lucrative business.**
- **No one can be denied prehospital care because of their inability to pay in the USA.**
- **An EMT, Basic Life Support call can be billed for as much as \$800.00**
- **A Paramedic, Advanced Life Support call can be billed for as much as \$2,400.00.**
- **Including flight medics, critical care interventions and long distances can result in bill above \$50,000.00.**



Joe Cassano @jcassano15

happy sunday new york. call some else for a ride to the hospital
pic.twitter.com/djhb8hT87k



Joe Cassano @jcassano15

i love my white dad pic.twitter.com/qGypWRf45Y

LATER, HATER

EMT son of fire commish quits, 'sorry' for racist rants

BY JEFFREY M. HARRIS
PHOTOGRAPH BY JEFFREY M. HARRIS

THE SON OF THE MAN WHO GOT THE JOB IN December and was named fire commissioner of the city of New York, a former EMT son of a fire commissioner has quit his job and apologized for racist rants. The son, who got the job in December and was named fire commissioner of the city of New York, a former EMT son of a fire commissioner has quit his job and apologized for racist rants. The son, who got the job in December and was named fire commissioner of the city of New York, a former EMT son of a fire commissioner has quit his job and apologized for racist rants.





Joe Cassano
 All the Jews are out in Manhattan today
 #synagogue



Joe Cassano
 Getting sick of picking up all these obama lovers and taking them to the hospital because their medicare pays for an ambulance and not a cab

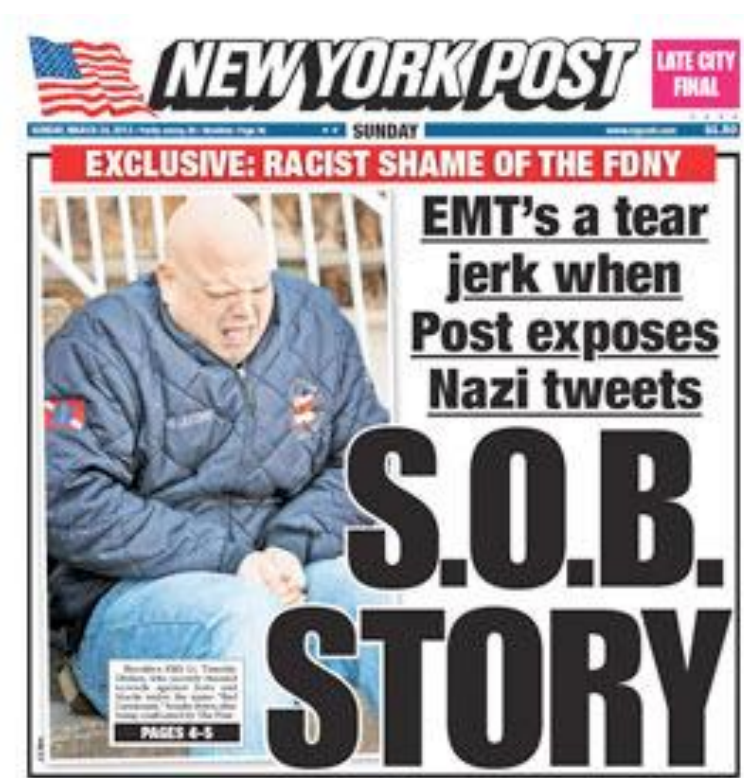
5-ALARM HATER



EXCLUSIVE

Examples of EMS Nonfeasance

- ☐ **Not taking a complete set of vitals.**
- ☐ **Engaging in “Vital Vision.”**
- ☐ Not performing a protocol mandated intervention.
- ☐ Not staying up to date with Protocol changes.
- ☐ Not staying up to date with your Continuing Medical Education.
- ☐ “Air & Chair” mentality.



Examples of EMS Misfeasance

- ☐ Giving a medication for the wrong condition, such as Aspirin for GI distress.
- ☐ Dropping the patient down the stairs.
- ☐ Clamping the umbilical cord in the wrong places.
- ☐ Giving the wrong dose of a medication.
- ☐ Splinting incorrectly.



**SUSPENDED FOR STOPPING
EMT OUT OF WORK FOR HELPING CHOKING GIRL**

HEADLINE
HEADLINES HEADLINES

Examples of total Ethical Malfeasance in EMS Pt. 1

- ☐ Assaulting a patient, even in so-called “self defense”.
- ☐ Taking pictures of patients.
- ☐ Posting pictures of patients on social media.
- ☐ Striking a patient with your oxygen tank.
- ☐ Taking money from a patient's home or wallet.
- ☐ Listening to breast sounds.
- ☐ Performing an intervention outside of your scope of practice, such as an emergency c-section.
- ☐ Being intoxicated and or on drugs while at work.
- ☐ Reckless, irresponsible operation of the emergency vehicle.

Examples of total Ethical Malfeasance in EMS Pt. 2

- ☐ Stealing, selling & or using medications and equipment.
- ☐ Posting hate speech on social media.
- ☐ Refusing to treat a patient because of their race, religion or sexual orientation.
- ☐ Killing pedestrians with your ambulance.
- ☐ Stealing etomidate and attempting to use it to drug women at clubs.
- ☐ Using the fire department emergency key to lock women in elevators and rape them.
- ☐ Breaking patient confidentiality.
- ☐ Stealing and selling social security numbers.

Special Reporting Requirements

- Abuse of children, elderly, and spouse
- Injury during the commission of a felony
- Drug-related injury
- Childbirth
- Drug manufacture or trade
- Terrorism
- Human trafficking

Physical Signs of Death

- **Death is the absence of circulatory and respiratory function; not breathing, no pulse.**
- You are obligated to begin cardiopulmonary resuscitation unless there are **obvious signs of death** or a **valid DNR order**.
- You can withhold CPR and resuscitative efforts in the case of **OBVIOUS SIGNS OF DEATH; putrification, decapitation, rigor mortis, dependant lividity**.
- You are not able to pronounce a patient dead via medical control, until they are warm and dead; work up all hypothermic patient.

Presumptive signs of Death

- Unresponsive to painful stimuli
- Lack of pulse or heartbeat
- Absence of breath sounds
- No deep tendon or corneal reflexes
- Absence of eye movement
- No systolic blood pressure
- Profound cyanosis
- Decreased body temperature

Definitive Signs of Death

- Obvious mortal injury
- Dependent Lividity (Blood Pooling)
- Rigor Mortis (stiffness)
- Putrefaction (decomposition of body)
- Decapitation (Missing a head)

