

Forsyth County EMS

Patient Care Policy: Physician on Scene

1. When on-the-scene of an emergency or non-emergency outside a clinical setting, an EMT may occasionally be approached by a person who claims to be a physician and who may indicate a willingness or desire to be involved in the patient's treatment. Ask this person for proof that he/she is a licensed medical physician in North Carolina. Dentists, chiropractors, and veterinarians are not considered medical physicians on-the-scene of a medical emergency.
2. The Forsyth County EMS Physician Information Card must be presented to this individual. A supply of these cards should be kept on each FCEMS unit and it is recommended that each employee carry this card while on duty. This card states:

Forsyth County EMS thanks you for your offer to assist with the care of this patient:

Please be advised that the EMTs and ALS Professionals of the Forsyth County EMS are operating under the authority of the State of North Carolina and under protocols established by the EMS Medical Director and approved by the Office of EMS of the State of North Carolina. The ALS Professionals of the EMS are under the direct authority of a Medical Control Physician and are in direct contact with said physician.

*To avoid confusion and to expedite patient care, no individual should intervene in the care of this patient unless requested to do so by the attending FCEMS personnel, and **Authorized to do so by the Medical Control Physician. You must also be licensed to practice medicine in North Carolina.***

You may request to talk directly to the base-hospital physician to offer your advice and assistance.

*If approved by the Medical Control Physician and you assume patient management, you accept responsibility for patient care until the attending medical control or emergency department physician accepts responsibility. **YOU ARE REQUIRED TO ACCOMPANY THE PATIENT TO THE EMERGENCY DEPARTMENT.***

EMS Personnel can not carry out any procedures that are not permitted under approved protocols.

Your cooperation and assistance is greatly appreciated.

*R.L. Alson, MD
Medical Director, Forsyth County EMS*

3. Ask if the physician is willing to assume all responsibility in the course of treatment.
NOTE: Patient Care is not delayed while these decisions are made.
4. If the physician on-scene is not willing to assume full responsibility for treatment, or to ride in back of unit to hospital, EMS must stay with their own course of treatment under our medical control.

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5. Anytime you encounter a physician on scene a supervisor **MUST** respond to assist with the situation and to gather the required information. This requirement does not refer to situations where physicians are encountered within their own medical facility such as doctor's offices, hospitals, clinics, etc., or where you encounter a physician in charge of a specific athletic event. However, even in these cases, if a situation develops that rises the concern of FCEMS personnel, or in which the physician expresses concerns, a supervisor **MUST** be notified and should respond if possible.
6. When responding to a physicians office or medical facility where there is a physician present, who is providing care for the patient, FCEMS personnel will follow the orders of said physician as long as these orders are within the scope of practice, policies, and protocols of FCEMS. Medical Control will be notified of same as soon as practical. Orders from the physician will be documented on the PCR. (i.e, ...Verbal orders from Dr. X, on scene at his office for oxygen, monitor, IV, and Nitroglycerin...)
7. In ALL situations where physicians are on the scene outside a medical facility, identify themselves and express a desire to be involved, whether they are ultimately allowed to intervene or not, the following information **MUST** be gathered from the physician and forwarded to 801 along with the corresponding PCR(s). 801 will forward this information to Medical Director for review.

Physician's: Name
 Address*
 Telephone number*
 Hospital affiliation or practice

**May be gathered after the call has ended.*

This same information must be gathered and forwarded as described above for situations as listed in #5 above where concerns are raised within a medical facility.

Any encounter with an MD on scene that is considered questionable must be reported to the Medical Director or their designee that day by the FCEMS Supervisor. A follow-up will be completed in writing by 801 and delivered to the Medical Director or their designee as soon as is practical.

8. If the physician accepts responsibility, medical control (the attending physician in the ER; or the Medical Director or their designee) should be contacted and informed of the situation. If the physician at medical control approves the physician on-scene to be in charge of the patient the EMT on-scene may function under that physician's orders **AS LONG AS SUCH ORDERS ARE WITHIN FCEMS PROTOCOLS.** A supervisor **MUST** be notified as soon as possible.

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9. FCEMS personnel will present themselves with a professional demeanor at all times, and will cooperate with and assist the physician to the extent allowed by protocols.
10. Any physician taking on-scene responsibility must accompany the patient to the hospital in the back of the unit with an EMT present also. The physician must provide written documentation of his/her actions/interventions. This documentation must be attached to the PCR.
11. Enter the physician's name and address on the PCR, as well as the physician at medical control who gave permission for physician responsibility transfer.

Approved by:
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EMS Director
October, 2003

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October, 2003