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EMERGENCY MEDICAL SERVICES POLICIES and PROCEDURES

PATIENT CONTACT

I. Purpose: To establish criteria of what defines a patient for Emergency Medical Personnel, and when patient contact has been made.

II. Authority: Health and Safety Code, Division 2.5, Sections [1797.204](#), [1797.206](#), and [1798](#).
California Code of Regulations, Title 22, Division 9, Sections [100144](#), [100145](#), [100146](#), [100169](#).

III. Definitions:

- A. **Decision-Making Capacity:** The ability to understand the nature and consequences of proposed health care. This includes understanding the significant risks and benefits and having the ability to make and communicate a decision regarding proposed health care. A person has decision-making capacity if they are able to:
 - Understand the need for treatment, the implications of receiving and not receiving, and alternative forms of treatment that are available, and
 - 1. Relate the above information to their personal values, and then make and convey a decision.
 - 2. Capacity differs from the legal definition of competency, which extends beyond the act of making specific medical decisions.
- B. **Patient:** Any person for whom 1) EMS system has been activated, or who EMS providers encounter, **and** 2) that meets one or more of the following criteria:
 - 1. Has a known or obvious injury or illness
 - 2. Has communicated a medical complaint
 - 3. Requests EMS provider assessment, treatment, and/or transport.
 - 4. Has experienced an acute event that could reasonably lead to illness or injury
 - 5. Is determined to **not** have decision-making capacity
- C. **Patient Contact:** Patient contact occurs if EMS providers have visual, verbal, or other interaction with any individual meeting the patient definition criteria.
- D. **Legal Majority:** majority age status at which full personal and civil rights may be exercised.
- E. **Duty to Act:** a legal duty requiring a party to take necessary action to prevent harm to another person or the general public.

IV. Policy:

- A. EMS providers have a duty to act and render emergency treatment and/or transportation when indicated for patients under the following conditions:
 - 1. When medically indicated
 - 2. When requested to render treatment and/or transportation
 - 3. When evidence for impaired capacity exists in accordance with SBCEMSA policies
 - 4. When a person is not of legal majority (majority age status at which full personal and civil rights may be exercised).
- B. If any uncertainty of the request for medical aid or emergency medical condition exists, an EMS provider will consider the individual a patient.

APPROVAL:

SIGNATURE ON FILE
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- C. It is the responsibility of all EMS providers to work collaboratively with the overall goal of providing high-quality patient care and transport.

V. Procedure:

- A. All EMS providers are responsible for documentation for all responses in accordance with SBCEMSA policy.
- B. All providers shall follow SBCEMSA policies when caring for patients.

VI. References:

- A. [Policy 507 Refusal of Prehospital Services](#)
- B. [Policy 700 Documentation of Prehospital Care](#)

VII. Attachments: None