

# WEST MICHIGAN REGIONAL PROTOCOL

## PHYSICIAN ON-SCENE POLICY

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**Purpose:** To provide a process for interaction between EMS personnel and physicians at the scene of a medical emergency.

**I. Definitions:**

**A. Patient's Personal Physician:**

The patient's personal physician is a licensed Medical Doctor (MD) or Doctor of Osteopathy (DO) who is the private physician of the patient and is physically present at an emergency scene.

**B. Intervener Physician:**

An intervener physician is one who is a licensed physician (MD or DO) who is not the patient's personal physician and is physically present at an emergency scene.

**C. Medical Control Physician:**

A medical control physician is one who practices in a local hospital emergency department and who also provides on-line medical direction via radio or telephone. This physician is not typically physically present at the emergency scene.

**M B S P**

**II. Patient Management**

**A. Responsibility of Medical Control**

(When an EMS agency arrives to the scene of an emergency, a doctor/patient relationship has been established between the patient and the physician providing medical direction.) The EMS provider is responsible for management of the patient and acts as the agent of the medical control physician unless the patient's personal physician is present (as would occur in a doctor's office).

**B. In the Presence of the Patient's Personal Physician**

1. Establish that there is a pre-existing doctor/patient relationship.
  - a. At the physician's office there is little issue of identification.
  - b. At a location other than the physician's office, the patient or a family member may identify the physician as the personal physician of the patient.
    - i. If no means are available to confirm the status of the physician as the patient's personal physician, refer to the intervener physician section below (C).
2. Provide the physician with the "Physician on Scene" card.
3. Defer to the orders of the personal physician. This includes, but is not limited to, the right of that physician to declare death.
  - a. EMS providers may not accept orders that are outside of their scope of practice as defined in the protocols.
  - b. If the physician's actions or orders would, in the opinion of the EMS providers, put the patient at risk or cause undo harm, immediately contact on-line medical control for direction. A peer to peer (physician to physician) consultation may assist in resolution of concerns.
4. The physician may choose to continue care of the patient en-route to the hospital. If the physician is willing to do ALL OF THE FOLLOWING, the physician will remain in control of the patient's care:
  - a. Assume full responsibility for the patient and the patient's care.
  - b. Accompany the patient, in the ambulance, to the hospital.
  - c. Provide guidance for the EMS report and sign the completed form.
  - d. If the physician is unwilling to comply with ALL of the above stipulations then the physician may not accompany the patient to the hospital.
5. Once the personal physician is no longer in attendance, EMS personnel should revert to normal operating procedures and protocols.

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### C. In the Presence of an Intervener Physician

1. Some physicians may offer assistance at emergency scenes; their **assistance** may be accepted as long as they do not place themselves, the patient, the EMS providers or others at risk.
2. Assure scene safety. Physicians who are in a location or environment that places them at risk should be asked to leave.
3. Provide the physician with a copy of the "Physician on Scene" card.
4. If the interverer physician wishes to direct patient care (assume on-site medical direction), ALL of the following stipulations MUST be met:
  - a. The physician must provide evidence of a State of Michigan Medical License.
  - b. The physician must speak with on-line medical control.
  - c. On-line medical control must directly advise the EMS personnel that they may take orders from the interverer physician.
  - d. Orders to the EMS providers should be repeated over the radio for purposes of documentation.
  - e. The medical control physician may reassume responsibility for and control of the patient care at his/her discretion.
  - f. The interverer physician must agree to assume full responsibility for the patient and the care rendered to the patient.
  - g. The interverer physician must accompany the patient, in the ambulance, to the hospital.
  - h. The interverer physician must provide guidance for documentation of the EMS report and must sign the completed form.
5. If ALL of the above stipulations are not met, the physician may not provide on-scene medical direction. Further participation at the scene is at the discretion of the EMS providers.
6. EMS providers will not accept orders that are outside of their scope of practice as defined in protocol.
7. If there are any disagreements between EMS personnel and the interverer physician, EMS personnel should immediately contact on-line medical control for direction and should contact a supervisor from the EMS agency.
8. If the actions of the interverer physician jeopardize the safety of the patient or any other person, or jeopardize patient care in any way, EMS personnel should contact a supervisor, medical control and the police.
9. Conflicts regarding responsibility for patient care or orders should be reported immediately to the medical control physician and EMS Medical Director.

### D. Medical Control Physician On-scene

1. If the physician on-scene is a local Emergency Department physician that is personally known by the EMS providers, only the stipulations concerning scene safety apply.
2. The EMS personnel should take direction from the medical control physician just as they would if they were speaking over the radio or phone.

### E. Other Medical Personnel on Scene

1. EMS personnel may encounter other medically trained personnel on an emergency scene. No other medically trained personnel may assume medical control over EMS providers; this includes, but is not limited to, dentists, off-duty

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paramedics, nurses, nurse practitioners, physician's assistants, respiratory therapists and off-duty EMT's.

2. EMS providers may, at their discretion, accept the assistance of other medically trained personnel at emergency scenes. Some of these personnel may have specialized skills such as intubation or IV placement, however, it is not appropriate to permit them to perform invasive procedures (such as intubation, IV placement or medication administration) unless they are third riders on the ambulance or are approved ALS providers in the local EMS system. Please refer to your local medical control policies for ALS EMS PROVIDER OFF-DUTY ACTIVITIES.



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### EMERGENCY MEDICAL SERVICES

#### PHYSICIAN ON-SCENE POLICY

Thank you for your offer of assistance. We appreciate your willingness to assist with an emergency situation.

EMS providers are not permitted to accept assistance from other medically trained professionals unless those persons can be positively identified. Please offer to show them your state license.

Please understand that these EMS providers are operating under the authority of Michigan Law. These EMS providers are trained to National EMS Standards and are tested and expected to operate according to local operating protocols, also known as "Standing Orders".

EMS providers are not permitted to perform procedures or offer treatments that exceed their training or scope of practice. If they decline any part of your help, advice or orders, please understand that they are performing according to their protocols.

You should also realize that many of the situations which EMS deals with are:

- Extremely hazardous
- May require the use of specialized personal protective equipment
- May require training in hazard recognition and mitigation
- If our crew asks you to leave the scene, it may be for your personal safety.

If you believe that the crew's actions are inappropriate, or in error, ask them to put you in contact with their Medical Control Physician, or ask them to contact their supervisor. Either, or both, will be immediately available.

If you, the physician, wish to provide onsite medical direction, or wish to continue care en-route to the hospital, you MUST AGREE TO ALL of the following conditions:

- Provide evidence of a State of Michigan Medical License
- Speak with the on-line Medical Control Physician
- Agree to assume full responsibility for the patient and the patient's care; the on-line Medical Control Physician must directly advise the EMS providers that they may take your medical directions
- Repeat orders via radio to on-line Medical Control for documentation purposes
- Accompany the patient, in the ambulance, to the hospital, and
- Provide guidance for the EMS report documentation and sign the completed run-form.

EMS Medical Director: \_\_\_\_\_

Reference: Public Act 179 of 1990

3/25/98

7/1/04

