19 Treating Minors

Adopted: 17 March 2019 Changed: Effective: 02 April 2019 Effective:

19.1 Purpose and Expected Results

The Squad strives to provide excellent patient care with the patient's consent. Minors may not provide legal consent. The emergency squad will provide appropriate care to minors consistent with the rules of legal consent and ethical responsibility.

19.2 Circumstances of Applicability

Anytime the squad is presented with a minor as a patient. A minor is defined as an individual who is under 18 years of age and is not one of the following:

- Legally emancipated
- Member of the Armed Services
- Married
- Pregnant
- A legal parent

19.3 Requisites

None.

19.4 Procedure Description

For the purpose of this procedure:

- a) A parent is defined as an individual of whom the patient is the biological or adoptive offspring, and who has custodial authority for the patient.
- b) A guardian is defined as an individual who has been given medical decision-making authority for the patient.

19.4.1 Parent or Guardian Not Present

If a parent or guardian is not present, and the patient has an emergent condition, consent is implied and will be assumed by the Crew. The patient will be provided care and transportation to an appropriate hospital.

Independent of the patient's condition, the ambulance Crew will make every reasonable effort to contact the patient's parent or guardian either directly, or through the appropriate law enforcement agency, and will not delay treatment or transportation while doing so.

If the minor is refusing treatment or transport and the crew feels that the minor is in need of such care or transport, a law enforcement agency will be contacted immediately for assistance.

19.4.2 Parent of Guardian Present

If a parent or guardian is present, or voice contact can be made, permission or consent to care for the patient will be sought.

19.4.2.1 Consent Given

If permission or consent for care is given, care will be given.

19.4.2.2 Consent Refused—Malignant Circumstances

If permission or consent for care is not given or refused, medical control will be contacted for advice and law enforcement contacted for protective custody of the patient in any of the following circumstances:

- a) The patient has an emergent condition
- b) The patient requires EMS care during transport
- c) The parent or guardian does not permit triage of the patient.
- d) Child abuse is suspected
- e) The parent or guardian is not capable of making informed decisions

19.4.2.3 Consent Refused—Benign Circumstances

If Section 19.4.2.2 does not apply, the parent or guardian may refuse additional care or transport. The procedure for informed refusal of care or transport applies.

19.4.3 Continuity of Care and Custody

If a patient-EMS provider relationship is established (such as by triage or assessment), care and custody of a patient may be transferred to no one other than one of:

- a) A parent of the patient
- b) A guardian of the patient
- c) An individual that the parent designates or approves
- d) Appropriate EMS personnel
- e) Appropriate hospital staff
- f) A law enforcement agent

19.4.4 Documentation

Consent to care for and refusal of care for a minor patient will be documented on the PCR. The following items are required:

- a) Who
- b) By what authority (parent, guardian, protective custody)
- c) When.

If consent was not immediately provided, consider documentation for the following:

- a) Means and methods attempted to obtain permission
- b) Circumstances for invoking implied consent.

Transfer of care must be documented, including:

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- a) To whom
- b) Whenc) Condition of patient at transfer.