



**To:** All Monroe-Livingston Agencies

Advisory 07-10

**From:** Manish N. Shah, MD, MPH - Regional Medical Director  
Terry Fairbanks, MD, EMT-P – REMAC Chair

**Date:** October 25, 2007

**Re:** New Refusal of Care Policy

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*Attached please find the following .pdf documents: Refusal of Care Policy; Refusal of Care Form; Refusal of Care Card; and the template for the electronic PCR format of the Refusal Form. If your agency would like the word document for these forms please contact Sheri Adam at OPC.*

Pursuant to the MLREMS Refusal of Treatment/Transport Policy approved October 15, 2007 and effective January 1, 2008, all agencies in the Monroe-Livingston Region must follow the protocol regarding the Evaluation, Medical Control Requirements, and Documentation of patient refusals. Although it is expected that the majority of agencies within the region will utilize the Refusal of Treatment/Transport form as approved by the REMAC, the following exceptions are recognized:

1. For agencies using an electronic medical record and a device capable of capturing patient and provider signatures electronically in the field, the agency may use a modified Monroe-Livingston EMS Region Refusal of Treatment/Transport Form for use on such an electronic device as approved by the Regional Medical Director or his/her designee.
2. For agencies wishing to use/create their own refusal of Treatment/Transport Form, the agency may do so using a modified Monroe-Livingston EMS Region Refusal of Treatment/Transport Form for agency use, but this must be approved by the Regional Medical Director.

In order to meet the requirements as set forth by the REMAC, the Regional Medical Director will approve such a modified electronic or paper form provided it includes all elements of the MLREMS Refusal of Treatment/Transport Form, specifically the criteria for Medical Decision Making Capacity Determination, Medical Control Criteria, and the Provider Refusal Checklist. The agency may, at their discretion, add additional requirements above those set forth by the REMAC. However, specific release of liability information must be available in both English and Spanish, and the accuracy of the Spanish version must be verified by back-translation.

This policy is intended to continue to provide agencies with the autonomy to use refusal of treatment/transport forms that are consistent with their specific needs and medical and legal counsel, while ensuring the region abides by the same standard of care. For additional questions please contact the Office of Prehospital Care ([opc@urmc.rochester.edu](mailto:opc@urmc.rochester.edu), or 463-2900).

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