

# Legal Issues, EMS System, and Safety Protocols

First Aid/CPR/AED Refresher Module 1

DETENTION  
TRAINING UNIT



# Duty to Act

- I. First responders have a special **responsibility to provide care** within the scope of their training
- II. You are protected from lawsuits if you act in **good faith** and provide care to the best of your ability within the scope of your training
- III. If you do not provide this standard of care, you could be found **negligent**
- IV. Once care is initiated, you must remain with victim until relieved by someone of equal or higher training

**\*\* Sworn Staff should activate 911 Emergency Medical Services when they recognize an incident that requires such a response. Sworn Staff DOES NOT need permission from supervisors or health staff prior to the activation of 911 Emergency Medical Services \*\***



# Gaining Consent

- I. An adult has the right to **refuse treatment**
- II. If the victim's untreated condition is deteriorating to a **life-threatening level**, you have a responsibility to act regardless of non-consent or flat refusal
- III. Consent is implied if the victim is unconscious



Help  
me!

# Maintaining Patient Confidentiality

## Protected Information under the Health Insurance Portability & Accountability Act (HIPAA):

“Individually identifiable health information”

- *Individual’s past, present or future physical or mental health or condition.*
- *The provision of health care to the individual.*
- *Past, present, or future payment for the provision of health care to the individual, with identifiable information such as name, address, birth date, SSN.*

“HIPPA protects the release of information, not the collection”



# HIPAA: Law Enforcement Purposes

Correctional facilities may disclose protected health information to law enforcement officials for law enforcement purposes under the following circumstances:

- I. Required by law (Court order, subpoenas, warrants, Admin requests);
- II. To identify or locate a suspect, fugitive, material witness, or missing person;
- III. L.E.O's request for information about a victim or suspected victim of a crime;
- IV. To alert L.E.O's of a person's death, if there is reason to believe the cause of death was criminal activity;
- V. When the health information is evidence of a crime that occurred on its premises;
- VI. When a health care provider needs to inform L.E.O's about the nature, location, victim, and perpetrator of a crime.



# San Diego Trauma System

- UC San Diego Health – *San Diego, Adult Level 1*
- Scripps Mercy Hospital – *San Diego, Adult Level 1*
- Rady Children's Hospital – *Kearny Mesa area, Pediatric Level 1*
- Palomar Medical Center – *North County, Adult Level 2*
- Scripps Memorial Hospital – *La Jolla, Adult Level 2*
- Sharp Memorial Hospital – *Kearny Mesa area, Adult Level 2*

**\*Level 1 = Level 2 + Research/Specialist/Edu\***

**Source: Health & Human Services Agency: San Diego County Trauma System**



# Boston Marathon - 2013



# Las Vegas- 2017





# Critical Incident Response: Incident Command System

- Establish Incident Command
- Establish clear lines of communication
  - ✓ *With EMS, other departments, other agencies*
- Evacuation Points
- Safety Protocols

**\*Operate in accordance with the Department's Emergency Operations Manual (Facility Specific)\***





# Hygiene Day



# PPE & Scene Safety

## PPE:

- I. Protect routes of entry: Eyes, mouth, nose, skin
- II. Use a CPR mask/barrier
- III. Wash hands



## Scene Safety:

- I. Scene size-up
- II. Common hazards
- III. How many involved?
- IV. Identify cause of illness or injury



# Mass Casualty/Triage

- **MINOR:** Direct to a safe location away from other victims and hazards
- **DELAYED:** Receives treatment once all victims are classified and immediate have been treated
- **IMMEDIATE:** Receives treatment first once all victims are classified.
- **NON-SALVAGEABLE:** Deceased





# Triage Cards



# VICTIM ASSESSMENT:

Initial Assessment and Focused Survey

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# Victim Assessment

## Performing Primary/Initial Assessment:

- *Check for major bleeding (Arterial Bleeding)*
- *Check airway and breathing*
- *Treat for shock*

## Performing Secondary Assessment/Focused Survey:

- *Check vital signs*
- *Check skin color, temperature, pulse, respiratory rate.*
- *Check head to toe looking for bruising, bleeding, broken bones, etc.*



# S.A.M.P.L.E. History

SAMPLE History - EMTprep.com

S.A.M.P.L.E   HISTORY





# Obtaining Patient History

Obtain patient history by observing and asking questions on the following subjects:

## S.A.M.P.L.E:

**S:** *Signs and symptoms*

**A:** *Allergies*

**M:** *Medication*

**P:** *Past medical history*

**L:** *Last oral intake (Food / Medicine)*

**E:** *Events leading to present illness*



# Emergency Patient Movement

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# Emergency Patient Movement

**\*NEVER MOVE A VICTIM UNLESS IT IS ABSOLUTELY NECESSARY\***

**Imminent Danger:** Danger outweighs the risk of further injury from being moved.

- *Burning vehicle,*
- *Burning victim,*
- *Traffic approaching, etc.*

**Unable to Survey:** When not possible to do an initial survey of victim, or unable to provide medical aid due to the victim's position.



# Patient Movement cont.

**Plan Ahead:** Perform a quick scene safety survey.

- *Is the scene safe to approach?*
- *How are you going to move the victim?*
- *Where are you moving the victim to?*
- *What are you going to do after moving the victim?*

**Communicate with the Victim:** Tell them why you are moving them and to where. Reassure the victim and keep them as calm as possible.

**Stabilize the Victim:** Move in a straight line, protecting the head, neck, and spine. Infants should be in car seats when moving them.



# Blanket Drag



# Chair



# One Rescue Lift





# Emergency Movement Tools

