

Western Regional Emergency Medical Advisory Committee

Title: On Scene Physician Policy	Effective Date: May 19, 2004 Page: 1 of 2
Policy #2004-2	Revised: June 2009

Policy:	<p>The direction of Prehospital care at the scene of a medical emergency should be the responsibility of the individual in attendance who is most appropriately trained and knowledgeable in providing prehospital emergency stabilization and transport. The EMS provider is responsible for management of the patient and acts as an agent of New York State Department Of Health (DOH) and his/her Medical Director.</p> <p>An on-scene physician may be the patient’s private physician (as would occur in a physician’s office) or a physician who has not established a prior relationship with the patient (as would occur at the scene of an auto accident).</p> <p>If s/he wishes to take charge of the patient’s care, s/he must comply with the following conditions:</p> <ul style="list-style-type: none"> ▶ Be currently licensed in New York State; ▶ Assume all responsibility for the patient’s care; ▶ Realize that EMS providers will not comply with orders that exceed their scope of practice; ▶ Must accompany the patient to the hospital if requested or needed. <p>If all of these conditions are not met or the on-scene physician is no longer in attendance, the EMS provider must revert to existing EMS protocols.</p> <p>In mass casualty incidents or disasters, the on-scene physician may be required to remain at the scene.</p> <p>When confronted by an on-scene physician, the EMS provider should present the “On-scene Physician Information” card.</p>
Procedure:	<p>If MC is not available (e.g. BLS unit or communication failure) The EMS provider should defer to the orders of the on-scene physician if conditions 1-4 above are met. If not met, the EMS provider must follow existing EMS protocols.</p> <p>If MC is available: MC is ultimately responsible for the actions of the EMS provider and shall</p>

	<p>be contacted. If there is any disagreement between the on-scene physician and MC, the EMS provider shall take orders from MC and place the on-scene physician in contact with MC. MC has the option of managing the case entirely, working with the on-scene physician, or allowing the on-scene physician to assume responsibility. The EMS provider and MC may re-establish on-line medical direction if either believes that the care rendered by the on-scene physician is inconsistent with quality care. The decision of the on-scene physician to accompany the patient to the hospital shall be made in consultation with MC.</p> <p>The on-scene physician shall document his/her interventions and orders in a manner acceptable to the local EMS system.</p>
Reference:	WREMAC ALS Protocols