

Policy:	Medical Directives	
Owner:	Regional Medical Director, Regional Program Manager	
Department/Program:	Southwest Ontario Regional Base Hospital Program	
Approval By:	Director, Emergency Services & Base Hospital	Approval Date: May 2011

Original Effective Date: May 2011	Last Review Date: June 2019	Last Revised Date: June 2019
	Reviewed Date(s): May 2012, May 2014, November 2016, January 2017, June 2018	Revised Date(s): April 2015, November 2016, June 2018

POLICY

This policy outlines the procedures for initiation of medical directives and the process for establishment of the Base Hospital Physician (BHP) patch contact when required.

PROCEDURE

1. In order to expedite patient management, medical directives have been developed which can be initiated by the [Paramedic](#) prior to the establishment of BHP patch (if required).
2. It must be clear that the existence of a medical directive does not in any way prohibit [Paramedic](#)/Base Hospital Physician consultation whenever deemed appropriate by the Paramedic.
3. The [Paramedic](#) will use his/her experience and judgment in making patient management decisions and will carry out procedures as defined by the Southwest Ontario [Regional Base Hospital Program](#) (SWORBHP).
4. The [Paramedic](#) will assess the patient's condition before and after the initiation of any medical directive. All patients will be appropriately monitored during this process.
5. [Paramedics](#) are encouraged to notify (SWORBHP) if any variation of protocol occurs before the violation is identified through the chart audit process. This must be reported through the [SWORBHP Communication Line](#).
6. In circumstances where a [Paramedic](#) establishes a patch and the verbal orders are not followed correctly, the [Paramedic](#) will clearly document on the ACR why the orders were not followed and report the variance through the [SWORBHP Communication Line](#). If the Paramedic feels that a secondary patch is required, they are encouraged to do so.
7. During inter-facility transport involving a patient under the care of a regulated health professional, the [Paramedic](#) shall follow the [Basic Life Support Patient Care Standard Version 3.1, Section 1- General Standards of Care](#) and upon request, assist with patient care only to the level in which the [Paramedic](#) is [authorized](#).

DEFINITIONS

Authorization

Means written approval to perform Controlled Acts and other advanced medical procedures requiring medical oversight of a Medical Director.

Paramedic

Means a Paramedic as defined in subsection 1(1) of the Ambulance Act, and for purposes of this Standard a reference to the term includes a person who is seeking Certification as a Paramedic, where applicable.

Medical Director

Means a physician designated by a RBH as the Medical Director of the RBHP.

Regional Base Hospital (RBH)

Means a base hospital as defined in subsection 1(1) of the Ambulance Act, and provides an RBHP pursuant to an agreement entered into with the MOHLTC.

Regional Base Hospital Program (RBHP)

Means a base hospital program as defined in subsection 1(1) of the Ambulance Act.

REFERENCES

[Basic Life Support Patient Care Standards Version 3.1](#)

Emergency Health Regulatory and Accountability Branch Ministry of Health and Long Term Care, March 1, 2018