

6.13 Identification Badges

- A. TDSHS requires that all personnel on an in-service vehicle or when on-scene be identified by their name, certification/license and provider name. **All members shall wear their identification badges as outlined in Rules and Regulations. All members shall also carry on their person their TDSHS certification card.**

6.14 Infection Control Precautions

- A. Use standard universal precautions during all patient interactions. Personal Protective Equipment (PPE) is supplied and available to all personnel.
- B. Wear gloves during all patient interactions. Contact with blood or body fluids may be unpredictable. Gloves reduce the likelihood of disease transmission during contact with blood or body fluids, non-intact skin or mucous membranes.
- C. In addition, wear masks, gowns and eyewear during patient interactions that are likely to produce spray, splash or any uncontrolled distribution of blood or body secretions. PPE's such as mask and eyewear shall be worn for procedures which may include, but are not limited to, ventilating, suctioning or intubating a patient. If large amounts of blood or body fluids are likely during procedures such as childbirth or trauma, gowns shall be worn to protect members.

6.15 Multiple Casualty Management

- A. Refer to Multiple Casualty Management and Triage Guidelines, Volume No. III Reference No. III-09.
- B. The Physician Director of EMS may authorize deviations to the Patient Care Guidelines and Standing Orders for BLS, and ALS Units when this guideline is in effect.

6.16 Non-Transports

Members of the Houston Fire Department are not to refuse transport.

A. General

The EMT or paramedic shall:

1. Decide if the patient is in need of care and/or transport only after a complete history and physical exam.
 2. Evaluate each patient and his/her circumstances and then make a determination, as would any other conscientious EMT or paramedic in a similar situation.
 3. If there is to be a patient refusal, the EMS apparatus shall complete the ePCR on the laptop in order to reduce the unnecessary response of an EMS transport unit and enable an EMS apparatus to return to service. The ePCR shall be completed by the EMT designated by the officer in charge.
 4. In multiple patient situations where HFD personnel are caring for and intending to transport seriously ill or injured patients, patient care is a higher priority than on-scene documentation. Other EMT's arriving on EMS apparatus on scene will document refusals and non-transports by agreement in order to **not delay the treatment/transport of seriously ill/injured patients.**
- B. Adult with Medical Decision Making Capacity : Refusing Care Against Medical Advice (AMA)
 1. The patient must meet the definition of having the 'capacity to refuse medical care' as defined in the definitions (*Ref. 3.11 and 3.24*). Importantly, the patient must recite back the nature of his/her medical condition, the risks and benefits of the proposed care and the risks of refusing the proposed care.
 2. Discuss the benefits of medical care/transportation with each patient. Offer medical care/transportation to an appropriate hospital. If the patient refuses medical care and/or transportation, inform the patient of the possible medical consequences of refusing treatment/