



Standard of Practice

Duty to Assist in an Emergency

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Standards of Practice of Medicine set out the requirements related to specific aspects for the quality of the practice of medicine. Standards of Practice of Medicine provide more detailed information than contained in the *Regulated Health Professions Act*, Regulations, and Bylaws. All members must comply with Standards of Practice of Medicine, per section 86 of the *Regulated Health Professions Act*.

This Standard of Practice of Medicine is made under the authority of section 82 of the *Regulated Health Professions Act* and section 15 of the CPSM Standards of Practice Regulation.

1. Definitions

1.1. In this section:

- 1.1.1. “disaster” means a calamity, however caused, which has resulted in or may result in the loss of life, or serious harm or damage to the safety, health or welfare of people.
- 1.1.2. “emergency” means a present or imminent situation or condition that requires prompt action to prevent or limit the loss of life or harm or damage to the safety, health or welfare of people.
- 1.1.3. “medical emergency” means a sudden injury, illness or complication demanding immediate or early medical care to save life or to prevent serious disability, pain or distress or it may arise in the context of a more widespread disaster or emergency, whether or not a state of emergency is formally declared pursuant to provincial or federal legislation.

2. Requirements

- 2.1. Subject to subsection 2(b), a member who is asked to attend a medical emergency must respond to render prompt and appropriate medical care to any person, whether or not the person is a current patient.
- 2.2. A member who does not attend a medical emergency when requested to do so must have a valid reason for the failure to attend. The following circumstances are recognized as potentially valid reasons for failure to attend:
 - 2.2.1. The member is already attending another medical emergency;
 - 2.2.2. Attending the emergency, places the personal safety of the member at an unreasonable risk;

- 2.2.3. Any situation where the member believes that his or her level of competence, health, or personal circumstances may compromise his or her ability to provide an appropriate level of care necessary to deal with the medical emergency.

- 2.3. The member's duty when called to an emergency is:
 - 2.3.1. to provide service within the scope of his or her proper professional competence and level of skill and, if he or she has no appropriate competence or skills, to present as a person with some knowledge of emergency first aid. The member is in the best position to know whether his or her area of competence and level of skill is sufficient to provide more than basic first aid.
 - 2.3.2. to apply his or her knowledge and skill to save life, to relieve suffering and to establish the most favourable conditions for the patient's ultimate recovery.

- 2.4. In a medical emergency, a member has a duty to work cooperatively with:
 - 2.4.1. other health care professionals and to recognize the competency or skills of other health care professionals;
 - 2.4.2. Regional Health Authorities and public health authorities within the federal and provincial health departments.