(EMT-I/EMT-P/MICN)

SUBJECT: **TREATMENT/TRANSPORT OF MINORS** REFERENCE NO. 832

PURPOSE: To describe the guidelines for treatment and/or transport of a patient under the age of eighteen.

AUTHORITY: Health and Safety Code Section 124260
California Family Code 6922, 6925, 6926, 6927, 6929, 7002, 7050, 7122, 7140
Business and Professions Code 2397

DEFINITIONS:

Emergency Medical Condition: A condition or situation in which an individual has an immediate need for medical attention. The presence of abnormal vital signs (heart rate and rhythm, respiratory rate, blood pressure – except isolated asymptomatic hypertension, oxygen saturation) are also indications of an emergency condition. Patients who meet any criteria for Base Contact or Receiving Hospital Notification are also considered to have an emergency medical condition.

Implied Consent: In the absence of a parent or legal representative, emergency treatment and/or transport of a minor may be initiated without consent.

Legal Representative: A person who is granted custody or conservatorship of another person by a court of law.

Minor: A person less than eighteen years of age.

Minor not requiring parental consent is a person who is:

1. Married or was previously married.
2. Currently or previously in a valid domestic partnership.
3. Not married and has an emergency medical condition and parent is not available.
4. On active duty with the Armed Forces.
5. Self-sufficient 14 years of age or older, living separate and apart from his/her parents, and managing his/her own financial affairs.
6. An emancipated minor with a declaration by the court or an identification card from the Department of Motor Vehicles.
7. Seeking care related to the treatment or prevention of pregnancy.
8. In need of care for sexual assault or rape.

APPROVED:

Director, EMS Agency

Medical Director, EMS Agency

9. Seeking care related to an abortion.

10. 12 years of age or older and in need of care for communicable reportable disease, prevention of a sexually transmitted infection (STI), alcohol or substance abuse, or outpatient mental health.

Voluntary Consent: Treatment or transport of a minor child shall be with the verbal or written consent of the parents or legal representative.

PROCEDURES:

I. Treatment/Transport of Minors

A. In the absence of a parent or legal representative, minors with an emergency medical condition shall be treated and transported to the appropriate receiving facility or a specialty care center (e.g. EDAP, PMC, PTC, SART Center, Trauma Center, etc.).

B. Minors should be transported using a restraint device appropriate for their size, weight, transport position, and medical condition. Restraint devices used should comply with the Federal Motor Vehicle Safety Standard (FMVSS) 213.

C. Hospital or provider agency personnel shall make every effort to inform a parent or legal representative where their child has been transported.

D. If prehospital care personnel believe a parent or other legal representative of a minor is making a decision which appears to be endangering the health and welfare of the minor by refusing indicated immediate care or transport, law enforcement authorities should be involved.

E. Infants ≤ 12 months of age shall be transported, regardless of chief complaint and /or mechanism of injury, in accordance with Ref. No. 1200.2, Treatment Protocol: Base Contact Criteria.

II. Minors **Not** Requiring Transport

A. A minor child (excluding children ≤ twelve (12) months of age) who is evaluated by EMS personnel and determined not to be injured, to have sustained only minor injuries, or to have illnesses or injuries not requiring immediate treatment or transportation, may be released to:

1. Self (consideration should be given to age, maturity, environment and other factors that may be pertinent to the situation)

2. Parent or legal representative

3. A responsible adult at the scene

4. Designated care giver

5. Law enforcement

B. Children 13 - 36 months of age require base hospital contact and/or transport, except those with no medical complaint or with isolated minor extremity injury.

C Prehospital care personnel shall document on the EMS Report Form to whom the patient was released.

CROSS REFERENCE:

Prehospital Care Manual
Ref. No. 508, **Sexual Assault Patient Destination**
Ref. No. 508.1, **SART Center Roster**
Ref. No. 510, **Pediatric Patient Destination**
Ref. No. 822, **Suspected Child Abuse Reporting Guidelines**
Ref. No. 834, **Patient Refusal of Treatment / Transport & Treat & Release at Scene**
Ref. No. 1200.2 **Treatment Protocol: Base Contact Requirements**