

The er nurse and patient rights



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The paper demonstrates the Issues and concerns when an emergency department patient refuses treatment and how to determine if they are capable to do so. As such, this paper should be of interest to a broad readership including those interested in mental capacity as defined by state statute, emergency detention, discharges of against medical advice, and how to determine if a patient is able to refuse treatment. Thank you for your consideration of my work.

If a patient does not have such capacity, professionals must ensure that all decisions about his or her treatment are made in the patients' best interest. Cummings, 2012) Emergency nurses must continually assess a patient's capacity to consent to medical treatment. When a patient refuses medical treatment it is the professional's responsibility to determine mental capacity of the patient in accordance with the law as it defines mental capacity and the right of the patient to refuse treatment. Determining if a patient has the mental capacity to refuse treatment is very difficult for the emergency room nurse.

The patient should be considered competent if he/she is aware of their surroundings, can understand what is being said, can agree to treatment without coercion, asks appropriate questions, can repeat in his/her own words what the risks, benefits, and alternatives are of the treatment, and can articulate why he/she is refusing the treatment. This assessment is subjective and unfortunately, the healthcare profession does not like it when a patient refuse treatment and will often try to detain a patient when mental capacity is not an issue.

Zolnierek, 2009) When treating patients receiving narcotics as part of their treatment, the emergency department nurse must be able to understand that this patient may still be able to refuse treatment per the state statute. Using the above criteria will ensure that the patient is not being forced to receive treatment against their will. A person cannot be forced to receive treatment against his or her will unless the individual meets certain legal standards.

A detention or involuntary commitment is only authorized if: The person (1) suffers from a mental illness; and, (2) due to the mental illness is dangerous and/or gravely disabled. Mental illness is defined on a state-to-state basis, but in general, it has the same definition. It is defined by statute as a psychiatric disorder that: 1. substantially disturbs an individual's thinking, feeling, or behavior; and, 2. impairs the individual's ability to function. The term includes mental retardation, alcoholism and addiction to narcotics or other dangerous drugs.

Dangerous is defined as a condition in which an individual, because of mental illness, presents a substantial risk that the individual will harm himself or others. Gravely disabled is defined to mean a condition in which an individual, because of mental illness is in danger of coming to harm because the essential human needs 2. has a substantial impairment or obvious deterioration of his or her judgment, reasoning or behavior that results in the individual's inability to function independently.

Information Maintained by the Office of Code Revision Indiana Legislative Services Agency) When a person is refusing treatment, the most important

next step is to continue to understand and assess if the patient is capable of doing so. A patient may sign out of the emergency department against medical advice (AMA) if the patient is over the age of eighteen years, does not exhibit an altered level of consciousness, has not ingested any alcohol or drugs that would impair judgment, and understands the complications, risks and consequences of refusing care.

It is the responsibility of the healthcare provider to ensure that the discharge is as safe and appropriate as possible, plan follow up care post discharge and ensure that the therapeutic relationship does not end with the AMA discharge. (Levy, Mareiniss, & Lacovelli, 2012) Patients that leave the emergency department against medical advice account for approximately 2.7% of all visits. This patient population cause stress for the emergency department nurse and physician because their illnesses are often acute and present a higher than normal liability.

The management of this patient population is difficult and education to both nurses and physicians is essential for the best patient outcomes. (Levy, Mareiniss, & Lacovelli, 2012) Understanding how the state statute defines mentally incapacitated and how to manage the patient using the AMA discharge are both important to reduce the risk of both the provider, nurse, institution and the patient.

References

<https://www.cdc.gov/mentalhealth/basics/burden.htm>

<https://iga.in.gov/legislative/laws/2014/ic/>

<https://assignbuster.com/the-er-nurse-and-patient-rights/>