EMERGENCY DEPARTMENT POLICIES

SUBJECT: DISCHARGE AGAINST MEDICAL ADVICE

Original date of issue: 11/25/74

Patient Population

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<th>Neonate</th>
<th>Pediatric</th>
<th>Adolescent</th>
<th>Adult</th>
<th>Geriatric</th>
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<tr>
<td>Revised:</td>
<td>4/85</td>
<td>10/90</td>
<td>6/91</td>
<td>2/93</td>
<td>3/97</td>
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POLICY:

1. If an adult patient or emancipated minor is informed by a physician of the medical consequences of leaving the hospital against medical advice but still wishes to leave, the physician will ask the patient to sign the Unauthorized Departure release (Permission Form #12 C-2-F12 (attachment I) the patient’s discharge may then be effective immediately.

The physician shall record in the medical record that the patient was discharged against medical advice and the medical consequences of the patient’s decision were explained to him in detail. These medical consequences should be listed by the physician in the Discharge note.

The Primary Nurse shall record in the medical record that the patient was seen by the physician (doctor’s name should be used) and that the patient is being discharged against medical advice.

2. If a patient refuses to sign the Unauthorized Departure release (Permission form #12 C-2-F12) the physician must have a nurse or another physician witness his conversation with the patient delineating the medical consequence of the patient’s decision to be discharged. The physician shall record in the medical record that the patient is being discharged against medical advice and the medical consequences of the patient’s action were explained to him in detail (consequences should be listed). The physician shall record the witness’ name and title in the discharge note. The physician shall also note that the patient refused to sign the Unauthorized Departure release.

The Primary Nurse shall record in the medical record that the patient was seen by the physician (doctor’s name should be used) and that the patient is being discharged against medical advice. The Primary Nurse shall also record the fact that the patient refused to sign the Unauthorized Departure release.
3. If a patient expresses a desire to leave, the physician should be notified and the patient’s chart provided. If the patient leaves before the consequences of his action has been discussed, an attempt to reach the patient by telephone will be done, as appropriate.

In cases of Discharge Against Medical Advice, normal discharge procedures are to be carried out.

4. If a patient’s condition is potentially life-threatening and the physician questions the patient’s capacity, a psychiatric consultation should be requested to assist in the determination of capacity.