**EMT/ADVANCED STANDING ORDERS - ADULT & PEDIATRIC**

- Routine Patient Care.
- Approach patient using the SAFER Model.
- Observe and record the patient’s behavior.
- Consider associated domestic violence or child abuse, see [Victims of Violence Policy 8.19](#).
- Determine if patient is under the care of mental health professionals and record contact information.
- Assess for risk to self and others. Ask patient directly if they are thinking about hurting self or others.

A patient who is a danger to self or others may not refuse care. Contact police if unable to convince patient to be transported. (Refer to [Police Custody Policy 8.14](#), [Refusal of Care Policy 8.15](#), and/or [Restraints Procedure 6.5](#)).

- If the patient does not appear to be an immediate threat to self or others and refuses transport:
  - Encourage patient to seek mental health evaluation.
  - Provide the mental health center emergency services number 1-800-273-TALK (8255).
  - Avoid leaving the patient alone, if possible. Assist in contacting responsible family/friend.

For patient with suspected Excited/Agitated Delirium:

- Treat hyperthermia, see [Hyperthermia Protocol 2.8](#).
- Monitor cardiac activity and oxygen levels.

**SAFER Model**

- **S** Stabilize the situation by lowering stimuli, including voice.
- **A** Assess and acknowledge crisis by validating patient’s feelings and not minimizing them.
- **F** Facilitate identification and activation of resources (clergy, family, friends, or police).
- **E** Encourage patient to use resources and take actions in his/her best interest.
- **R** Recovery/referral - leave patient in the care of a responsible person, professional or transport to appropriate medical facility. Do not leave the patient alone when EMS clears the scene.

**PEARLS:**

Consider all possible medical / trauma causes for behavior and treat appropriately:

- Hypoglycemia
- Head Injury, stroke, seizure (post-ictal)
- Poisoning, substance abuse, drug, alcohol

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*The New Hampshire Bureau of EMS has taken extreme caution to ensure all information is accurate and in accordance with professional standards in effect at the time of publication. These protocols, policies, or procedures MAY NOT BE altered or modified.*

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