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| **Guideline: Against Medical Advice** | Guideline #: |
| Effective Date: | Review Date: [annually, bi-annually, etc.] |
| Approved By: | Revision Date:  |
| Approval Date: | Number of Forms: [2], [AMA Form, AMA Physician Documentation Checklist] |

**Guideline Statement:** Patients have a right to refuse continued hospital treatment and care. Medical and patient-care staff members may advocate for the patient by attempting to determine:

* the reason(s) why the patient wishes to leave; and
* if the patient is aware of the possibility of a worsening condition.

When the patient asks to leave against medical advice (AMA), hospital staff may communicate the risks of leaving, follow hospital guidelines that will honor the patient’s request, and obtain the discharge AMA form.

**Scope of Guideline:** This guideline applies to both patients admitted to the Emergency Department for treatment and/or patients admitted to the hospital; these patients being treated may ask to leave the hospital against medical advice.

**Guidelines**:

* Once the patient asks to leave the hospital prior to the completion of care/treatment, the attending nurse notifies the attending physician of the patient’s desire to leave.
* Decisional capacity (the capacity to understand and make an informed decision about their medical care) must be determined and documented.
* The patient who appears to have decisional capacity is given information about the risks, benefits, and alternatives of refusing further care or treatment.
* The patient who appears to lack decisional capacity may be a danger to self or others; appropriate intervention by behavioral healthcare staff to determine the level of care may be necessary to detain the patient from leaving the hospital.
* The physician/designee explains the potential diagnosis, recommended treatment/procedure(s), alternatives to treatment, expected benefit(s) of treatment, and the potential risk of no treatment(s) to the patient or patient representative.
* If the patient continues to insist on leaving, the discharge AMA form is reviewed and signed by the physician or designee along with the patient and/or patient representative (to include date, time, and witness).

AMA Guideline, continued

* Provide discharge instructions to the patient for follow-up care. Unless the patient refuses, the patient should sign the discharge instructions. If the patient leaves without signing the AMA discharge form, document this on the form and place the form in the medical record.
* Notify the attending physician that the patient refused to sign the discharge AMA form. Discharge instructions may be mailed to the patient’s home as indicated.

**Document:**

* Assessment of the patient’s decisional capacity.
* Discussion(s) with the patient regarding the severity of his/her illness and the potential consequences of leaving AMA.
* Discussion(s) of scenarios that would prompt immediate return to the emergency department and that the patient may return to the hospital at any time.
* Conversation(s) including the events related to the patient’s departure, condition(s) upon leaving the hospital, and disposition of belongings.
* All arrangements made for a follow-up phone call, home care, or outpatient appointment (as indicated).
* Follow-up instructions given, including prescriptions for new medications.
* Treatment options discussed and the risks associated with not adhering to treatment.
* Communication with the patient’s primary care physician regarding discharge AMA and follow-up plans, as appropriate.