



A doctor's duty to help in a medical emergency

Key points about attending to a medical emergency

A medical emergency is a sudden, unforeseen injury, illness or complication that requires immediate or prompt treatment to save life or prevent further injury, pain or distress.

You have an ethical obligation as a doctor to respond promptly if asked to attend a medical emergency. If you choose not to attend a medical emergency, you must be able to justify your decision.

In a medical emergency, time is critical, and it may not be practical to obtain the patient's consent before initiating treatment. It is best practice to document your actions and discuss them with the patient and their family/whānau when appropriate.

About our statement on a doctor's duty to help in a medical emergency

This statement sets out legal and ethical considerations as a doctor when responding to a medical emergency. It also discusses a number of factors you should consider when you attend to a medical emergency, whether that emergency is within a healthcare facility, or in a non-clinical setting, such as in the community.

What is a medical emergency?

- 1 A medical emergency is a sudden, unforeseen injury, illness or complication that requires an immediate or prompt response to save life or prevent further injury, pain or distress. When faced with, or called to attend an emergency, a doctor should aim to apply their knowledge and skills to save life and relieve suffering. This is the basic philosophy of medicine.¹
- 2 A medical emergency is not the same as a "state of emergency" where a government has special powers to act or impose policies during a natural disaster, civil unrest, armed conflict, pandemic, epidemic, or other biosecurity risk.

What are my obligations in a medical emergency?

- 3 Respond promptly if you are asked to attend a medical emergency. This is your ethical obligation as a doctor.
- 4 In some situations it may not be practical or appropriate for you to attend a medical emergency. For example:
 - a if you are already attending another emergency;
 - b if it is more appropriate for an emergency service to attend (such as an ambulance or rescue helicopter);
 - c your geographical location is such that another doctor or medical service could attend more promptly;
 - d if you have recently consumed a substance such as alcohol, or medication to a level where your clinical judgement or skill could be impaired or compromised;

¹ Adapted from Steven Miles' definition of 'medical emergency'. For more information, see Duncan AS, Dunstan GR, Welbourn RB (eds). *Dictionary of medical ethics*. Second edition. Darton, Longman & Todd, London. 1981. 155-156.

- e if attending the emergency puts your personal safety at risk;
- f any other situation (such as fatigue) where your skills, judgement or health may compromise your ability to respond appropriately to the medical emergency
- g if attending the emergency puts the personal safety of those dependent on you at risk (such as your children).

If you choose not to attend to a medical emergency, you must be able to justify your decision.

- 5 Failing to attend a medical emergency simply because it is inconvenient for you is unacceptable and may result in disciplinary action. It is good practice to document your reasons for not attending a medical emergency, in case your decision is queried at a later date.
- 6 If you attend or assist in a medical emergency, you have a duty of care to the patient. If your initial assessment occurs over the phone, obtain relevant information from the caller to make an accurate assessment of the situation. If you are unable to attend to the medical emergency in person, you should still make reasonable effort to help the caller to find alternative, timely and appropriate care from another health professional.

What if I do not have the right skill to respond to a medical emergency?

- 7 Doctors have different levels of skills and knowledge. As a doctor, you are best placed to decide whether you have the right skills to help in a medical emergency. In some situations, your skills may be limited to basic first aid.
- 8 If you do not have the right skills to help in a medical emergency, you should still assist where possible, within your own skill set.

Legal considerations in a medical emergency

- 9 A registered doctor may provide help in an emergency even if they do not hold a current practising certificate or the assistance is outside their registered scope of practice and any stated conditions.²
- 10 The help you provide in a medical emergency should be to a reasonable level of care and skill, and in line with legal, ethical and other relevant standards.³
- 11 Everyone who has charge of a sick person (which may include a doctor asked to look after a person in a medical emergency), has a legal duty to provide what is necessary to that person, and to take reasonable steps to protect that person from injury. A doctor could be liable if they fail to meet the standard of care expected of them.⁴

Ethical considerations in a medical emergency

- 12 As a doctor, you should act in the patient's best interests at all times. In a medical emergency, this involves assessing the situation at hand and deciding what the most appropriate course of action should be for the patient you are called to assist.
- 13 Assess whether any actions you take or recommend could harm the patient. Evaluate the risks of harm to ensure that they do not outweigh the benefits to the patient.
- 14 In a medical emergency, time is critical, and it may not be practical in the circumstances to obtain the patient's consent before initiating treatment. If you proceed to treat the patient without their consent, it is best practice to document your actions and discuss them with the patient and their family/whānau when appropriate.

Working with colleagues in a medical emergency

- 15 Teamwork is vital in a medical emergency. You should work collaboratively with other people in the health service, and be respectful of their skills and contributions. At times, it may be more appropriate for a first responder, such as a paramedic or nurse, to lead the team, with support from a doctor.

² See section 8(3) of the Health Practitioners Competence Assurance Act 2003.

³ See Right 4 of the Code of Health and Disability Services Consumers' Rights.

⁴ See section 151 'Duty to provide necessities and protect from injury' in the Crimes Act 1961.

Debriefing after the event

- 16 Attending to a medical emergency can be stressful and can take a toll on you physically, mentally and emotionally. Consider debriefing after the event with a colleague or someone you trust, while protecting the patient's privacy.

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This statement was updated in February 2021. It replaces the August 2006 statement on *A doctor's duty to help in a medical emergency*. It is scheduled for review in February 2026. Any changes to the law before that review may make parts of this statement obsolete.
