

## **1.2 Legal Issues in Resuscitation**

### A. Stopping to Help

***"whomsoever you see in distress, recognize in them a fellow person"***

*Lifesaving Society motto*

Legislation regarding first aid is different in every province in Canada, but many jurisdictions have what is called a "Good Samaritan" Law. If you aren't familiar with the story of the Good Samaritan, it was basically about a guy who helped someone he didn't know in distress despite being \_\_\_\_\_.

Here is the current law in British Columbia:

### **Good Samaritan's Act**

#### **No liability for emergency aid unless gross negligence**

**1** A person who renders emergency medical services or aid to an ill, injured or unconscious person, at the immediate scene of an accident or emergency that has caused the illness, injury or unconsciousness, is not liable for damages for injury to or death of that person caused by the person's act or omission in rendering the medical services or aid unless that person is grossly negligent.

#### **Exceptions**

**2** Section 1 does not apply if the person rendering the medical services or aid

- (a) is employed expressly for that purpose, or
- (b) does so with a view to gain.

[http://www.qp.gov.bc.ca/statreg/stat/G/96172\\_01.htm](http://www.qp.gov.bc.ca/statreg/stat/G/96172_01.htm)

1. What does "grossly negligent" mean?
2. Does this act cover you when doing first aid at work?
3. Could you be liable in a different province or country?

## B. Getting Consent

In general, people have the legal right to refuse any first aid treatment. If a patient refuses treatment, you must stop (although you would still \_\_\_\_\_ if you think it may be necessary).

1. What if the person is unconscious?
2. What if it is a child?

## C. Being liable.

If you are required to do first aid as part of your job, then you **can** be held liable (the Good Samaritan's Act does not apply). A few things to be aware of:

- 1) \_\_\_\_\_: the employer is liable for actions of the employee
- 2) \_\_\_\_\_: when a death occurs, a thorough investigation follows

To prove negligence, three things must be established

- 1)
- 2)
- 3)

## D. "No Cardiopulmonary Resuscitation" order

People can get a " \_\_\_\_\_ " order from a doctor (used to be called a "Do not resuscitate" order), although it is not very common outside of a hospital. It could be due to something like a terminal illness.

**First aid personnel \_\_\_\_\_ provide critical interventions and call 9-1-1 as trained even if presented with the "no C.P.R." order.**

Why?

### E. Too much Resuscitation?

Due in part to its sensational portrayal in the media, a lot of money has been placed into the research and development of improved resuscitation techniques. The newest technology of AED's finally seems promising, and resuscitation has begun to actually save many lives in emergency situations. This has perhaps contributed to the popular belief that every sudden death is a premature death. When asked about their preferred way of dying, most would say that they would like to die while still *reasonably* healthy, in their own home, and with their family. However, there is a definite disparity between that ideal, and reality. In reality, life is prolonged as long as possible, so that we can have a "good" dying experience in the hospital. Humans now believe that they should control the time and place of death and this perception *may* be unhealthy at some point.

I believe that we do have to be careful that CPR does not become simply a sociological ritual that is unilaterally applied to all situations. In many cases, resuscitation attempts simply drag out the dying experience when it is not successful. Instead of dying suddenly, one is subjected to the final memory of other people's sorrow and desperate attempts at resuscitation. There are some cases where "No CPR" orders are appropriate. In rare out-of-hospital situations, this is the case for some people with a terminal illness.

*Source: Sutcliffe, Joel (2001) "Cardiac Resuscitation: A Scientific-Ethical Overview"*

### F. End of Life

**"death is the destiny of every man; the living should take this to heart"**

At some point, everyone passes from physical life to death and everyone will have the decision made on whether or not to attempt resuscitation.

- 1)
- 2)
- 3)
- 4)
- 5)
- 6)
- 7)

A person can choose how they end their life and create a \_\_\_\_\_. If they haven't done that then doctors are generally required to attempt resuscitation.

Active Euthanasia and Physician-Assisted Suicide and Mercy Killing are all currently illegal in Canada.

Famous Examples:

- 1)
- 2)
- 3)
- 4)

## Conclusion

For medical professionals...

### **Hippocratic Oath**

*"for the benefit of the sick according to my ability and judgment; I will*

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For Good Samaritans...

### **Lifesaving Motto:**

*"whomsoever you see in distress, recognize in them a fellow person"*

## Questions:

- 1) In what situations would you find it difficult to be a "Good Samaritan"? Would you ever just walk right by?
- 2) What would you do if you stopped at the scene of an accident and someone appeared to be hurt but did not want your help?
- 3) Why is it so difficult to recognize a "No C.P.R." order outside of a hospital?
- 4) Would you ever get a "No C.P.R." order yourself? Why or why not?
- 5) Do you think that Physician-Assisted Suicide *should* be legal? What are some of the main arguments for and against?
- 6) Find one example of an end-of-life issue in the news, and explain your opinion on the situation. Also print or link the source.