

Suggested response provided for in-flight medical emergencies

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(HealthDay)—In a review article published online Sept. 3 in the *New England Journal of Medicine*, guidance is offered for physicians providing emergency in-flight medical care.

Jose V. Nable, M.D., from the Georgetown University School of Medicine in Washington, D.C., and colleagues discuss the frequency of in-flight medical emergencies and the potential liabilities surrounding the provision of in-flight [medical care](#).

The authors note that a physician who provides assistance in an in-flight medical emergency creates a doctor-patient relationship, with its associated obligations and liability risk. Liability is usually determined under the laws of the country in which the aircraft is registered. The provider should document care rendered and treatment provided after the event, while being mindful of patient's privacy rights. A suggested

approach to handling in-flight emergencies should include asking for permission to treat, if feasible; using an interpreter if necessary, while considering patient privacy; taking a patient history, performing focused physical examination, and obtaining vital signs; administering treatment, with the patient remaining seated while possible; and communication and coordination with ground-based medical resources. The physician should continue to administer care until the condition is stabilized or care is transferred.

"Physicians should be prepared to render care while traveling; physicians must also be aware of the medically austere environment, its related limitations on prudent practice, and the associated liabilities surrounding the delivery of in-flight medical care," the authors write.

One author disclosed financial ties to Allianz Global Assistance.

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