

Guidelines for Non-Obstetrician Emergency Care



Reading time:
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Last Modified on 01/05/2024 1:41 pm AEST

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Hospital employed (employer indemnified) emergency doctors should be indemnified in respect of any action or omission arising from carrying out the duties of that employment. Employers are vicariously liable for any acts or omissions of employees. You should always obtain written confirmation from your employer that they will indemnify you. If you are satisfied with your employer indemnity status and have no private practice, the MIPS Employer Indemnified no Private Practice category will be most appropriate to your practice. The category provides members with MIPS assistance for Medical Board complaints, coronial inquests, professional disputes and investigations by State Drugs and Poison services and similar investigations.

Many members also have limited private practice. MIPS provides employer indemnified practitioners with limited private practice member categories in a range of income bands. These may be selected by procedural physicians, specialists or any other medical practitioner. However these categories exclude undertaking private cosmetic, bariatric, obstetric, neurological procedures or spinal surgery and these practitioners are required to select a specialist category.

Members in Emergency Medicine may be required to undertake emergency obstetric services. Members who work and have been trained in Emergency Medicine are expected to do what they can where emergency situations apply (for example obstetric emergencies). MIPS assistance in such circumstances would be considered.

In general terms where members are not craft specialists in Obstetrics there should not have been an intention to manage the pregnancy and delivery of patients. This applies even where the general requirements of training, qualifications and experience are met. Also, after providing emergency care in the absence of a craft specialist, members should facilitate the earliest possible transfer of care back to the craft specialist for ongoing management. Practices and hospitals should ensure that appropriate qualified specialists (i.e. Obstetricians) are available for appropriate escalation as required.

Members should also note the Medical Board's Good Medical Practice: A code of conduct for doctors in Australia, 3.5 Treatment in emergencies which states "Treating patients in emergencies requires doctors to consider a range of issues, in addition to the patient's best care. Good medical practice involves offering assistance in an emergency that takes into account your own safety, your skills, the availability of other options and the impact on any other patients under your care; and continuing to provide that assistance until your services are no longer required."

For further enquiries contact MIPS clinico-legal advisers on 1800 061 113.

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