

VEDMATA ICU ON WHEELS AMBULANCE SERVICE
CONSENT FOR GROUND MEDICAL TRANSPORTATION OF PATIENTS WITH
SERIOUS MEDICAL ILLNESS

Name of patient*: _____ (Mandatory)

Name of relative*: _____ (Mandatory)

Relation: _____ (Optional)

I (attendant of the patient), hereby give my consent for transport / transfer of my patient as stated above, in the Vedmata ICU ON WHEELS Ambulance Services, at my own risk, without any liability to the Doctors / staff of Vedmata Healthcare Services which runs the ICU ON WHEELS Ambulance Services. The doctor accompanying the patient in Vedmata ICU ON WHEELS Ambulance Services, have explained to me in the language that I can understand, about the seriousness of the medical illness, present condition and the nature of disease of my patient in words & language that I can understand.

I am fully aware of the risks of transportation of a critically ill patient including death during transportation. Other risks include delays and discomfort associated with road conditions, transport problems, weather and patient's condition (that are not under direct control of ICU ON WHEELS ambulance), extended travel time, fatigue and dehydration; enforced immobility and access in the confined space of an ambulance; reduced availability of medical personnel and medical equipments as compared to a specialized Hospital's ICU. I have been informed, understand and accept that such risks may exacerbate the already existing serious medical condition of the patient and result in deterioration and possible demise during transportation. The treatment in an ambulance is only an emergency measure and does not match the full in-hospital treatment. I have been given an opportunity to ask appropriate questions regarding this consent and release and have received satisfactory response to my queries.

I also give consent for the use of emergency drugs, sedatives, anti-arrhythmic medications and any emergency procedure to be carried out on my patient if needed, as applicable, according to the clinical condition, during transportation; i.e. airway intubation and mechanical ventilator initiation, CVP line insertion, D.C. cardioversion, use of external pacemaker and cardio-pulmonary resuscitation as I understand that these could be vital / necessary for survival / treatment of my patient. I authorize the escorting medical personnel to provide such medical treatment as deemed necessary in the best medical interests of the patient.

I understand that the medical transport / transfer of the patient have not been recommended by Vedmata ICU ON WHEELS Ambulance Services; it has been requested by me / patient / family for compassionate reasons. We are not forced by anyone for using Vedmata ICU ON WHEELS Ambulance Services.

I also understand that the ambulance service is private & chargeable as per the ambulance rules and is exclusive of doctor's charges, that would depend upon the number of doctors required as well as the time involved in transfer of the patient, which in turn would depend upon the pre-transfer medical condition of the patient. I shall also pay for the drugs / disposable items used during transfer as well as the fees of the accompanying doctor (s) which have been conveyed to me before the transfer was initiated. I hold complete responsibility, and hereby release the administration, doctors and staff of Vedmata healthcare which runs Vedmata ICU on Wheels Ambulance Services from any medico-legal responsibility in case of any

unforeseen events / fatality during medical transfer.

Moreover, I hereby authorize Vedmata ICU ON WHEELS Ambulance Services to disclose and release medical information and records concerning the medical assistance provided to the patient before and during transportation to the treating physician as well as the destination hospital physicians (if any) including discharge papers and investigation reports.

I have been made clear by the transporting team that the transport would be done doctors who are having experience in the field of transport of critically ill patients, but may not be anesthetist by profession but are working in hospitals/ICUs as BHMS, BAMS medical officers or emergency medicine doctors.

I accept to pay an advance payment for calls outside Ahmedabad as decided mutually between parties in form of cash/NEFT/Cheque/Paytm on confirmation of the call, if there is no advance payment then Vedmata ICU on Wheels is not liable to provide the vehicle or the team at a defined date & time.

If the call is cancelled after a confirmation & before 12 hours of initiation of the call a sum of Rs. 5000 (Five thousand only) would be charges as administrative fees. If the vehicle has reached the initiation hospital/place as decided & then the call is cancelled or the call gets cancelled within 12 hours of the initiation due to whatsoever reasons then Vedmata ICU on Wheels would be charging 30 % of the total call charges which have been decided as call cancellation charges.

If there is a delay in initiation of the call once the vehicle & the team reaches beyond 30 minutes due to whatsoever reason, Vedmata ICU on Wheels would be charging Rs. 1000 per hour extra beyond 30 minutes of the scheduled departure time. Similar if there is a delay in taking the patient at the recipient place like hospital/emergency department beyond 30 minutes of the arrival a charge of Rs. 1000 per hour would be charged as waiting charges. Similarly if there is a call in which the patient is to be shown to a doctor/hospital on the way & then transferred to his destination hospital, if there is a delay beyond 30 minutes Vedmata would be charging Rs. 1000 per hour as call waiting charges.

Whenever Vedmata Healthcare is providing the vehicle without the doctor or staff which is arranged by the patient/relative, Vedmata ICU on Wheels is not liable to pay any amount to that medical or paramedical person & has to be directly dealt by the patient/relative.

Thanks for consenting