**Supplementary Materials**

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| **If [N] is checked for any of the following items, the patient does not meet the requirements for RMA. Activate ALS for transport to the appropriate health care facility.a** | | |
| Does the patient have a GCS of 15? | Y | N |
| Is the patient alert and oriented? | Y | N |
| Can the patient walk without assistance? | Y | N |
| Is there a sober individual who is willing to take responsibility for the patient? | Y | N |
| Is the patient over 18? | Y | N |
| Is alcohol the only substance the patient admits to consuming? | Y | N |
| Did the patient have a blood glucose level > 60 mg/dL? | Y | N |
| Is the patient cooperative? | Y | N |
| Are the patient’s vital signs within normal limits? | Y | N |
| Is the patient able to repeat back to the provider the risks of refusal? | Y | N |
| Can the patient recite the alphabet from A to Z without difficulty? | Y | N |
| **If [Y] is checked for any of the following items, the patient does not meet the requirements for RMA. Activate ALS for transport to the appropriate health care facility.a** | | |
| Does the patient have any significant medical history? | Y | N |
| Is there any evidence of trauma? | Y | N |
| Is there any airway compromise? | Y | N |
| Is the patient showing any signs of suicidal tendency? | Y | N |
| Is there any risk of harm? | Y | N |
| Does the patient report any significant pain? | Y | N |
| Did the patient report any loss of consciousness in the last 24 hours? | Y | N |
| Does the patient admit to consuming a large amount of alcohol within the last hour? | Y | N |

**Table S1.** Provider Checklist to Determine if Patients Can Safely and Legally Refuse Medical Care After Consumption of Alcohol or Other Illicit Substances

aProviders are instructed to contact online medical control for consultation and direction, particularly in cases where patient wishes to refuse transport to hospital.