

GENERAL ASSEMBLY OF NORTH CAROLINA
1989 SESSION

CHAPTER 655
HOUSE BILL 1036

AN ACT TO CLARIFY THAT MEDICAL AND HEALTH CARE PROVIDERS WHO VOLUNTARILY PROVIDE EMERGENCY TREATMENT AT LOCAL HEALTH DEPARTMENT FACILITIES AND NON-PROFIT COMMUNITY HEALTH CENTERS ARE UNDER THE GOOD SAMARITAN STATUTE.

The General Assembly of North Carolina enacts:

Section 1. G.S. 90-21.14 reads as rewritten:

"§ 90-21.14. First aid or emergency treatment; liability limitation.

(a) Any person, including a volunteer medical or health care provider at a facility of a local health department as defined in G.S. 130A-2 or at a non-profit community health center or a volunteer member of a rescue ~~squad~~ ~~squad~~, who receives no compensation for his services as an emergency medical care provider, who renders first aid or emergency health care treatment to a person who is unconscious, ill or injured,

- (1) When the reasonably apparent circumstances require prompt decisions and actions in medical or other health care, and
- (2) When the necessity of immediate health care treatment is so reasonably apparent that any delay in the rendering of the treatment would seriously worsen the physical condition or endanger the life of the person, shall not be liable for damages for injuries alleged to have been sustained by the person or for damages for the death of the person alleged to have occurred by reason of an act or omission in the rendering of the treatment unless it is established that the injuries were or the death was caused by gross negligence, wanton conduct or intentional wrongdoing on the part of the person rendering the treatment.

(b) Nothing in this section shall be deemed or construed to relieve any person from liability for damages for injury or death caused by an act or omission on the part of such person while rendering health care services in the normal and ordinary course of his business or profession. Services provided by a medical or health care provider who receives no compensation for his services and who voluntarily renders treatment at facilities of local health departments as defined in G.S. 130A-2 or at a non-profit community health center, are deemed not to be in the normal and ordinary course of the volunteer medical or health care provider's business or profession.

(c) In the event of any conflict between the provisions of this section and those of G.S. 20-166(d), the provisions of G.S. 20-166(d) shall control and continue in full force and effect."

Sec. 2. This act shall become effective September 1, 1989, and shall apply to volunteer emergency health care services provided on or after that date.

In the General Assembly read three times and ratified this the 15th day of July, 1989.