

EMS Protocol-Friendly Cultural Reference

Dutch (Netherlands) Patients

Purpose: Support effective communication and informed decision-making while maintaining protocol compliance.

Communication Guidance

- Use **plain language**; avoid jargon and euphemisms.
- State:
 1. What is happening
 2. What you recommend
 3. What risk changes if declined

Example:

“Based on your symptoms, transport lets us rule out serious causes. If you decline, the risk is X.”

Assessment Considerations

- Calm presentation ≠ low severity.
 - Actively assess pain, neurologic changes, and functional impact.
 - Expect concise symptom descriptions.
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Transport & Refusal Considerations

- Patients may decline transport after risk discussion.
 - Ensure:
 - Capacity is assessed
 - Risks are clearly explained
 - Alternatives (self-transport, follow-up) are discussed when appropriate
 - Document refusal thoroughly per protocol.
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Treatment Expectations

- Expect questions about:
 - Necessity of IV access
 - Medications given prehospital
 - Destination choice
 - Provide brief clinical justification aligned with protocol.
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Family & Bystanders

- Patient autonomy typically prioritized.
 - Family usually supportive, not directive.
 - Address patient directly whenever possible.
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EMS Best Practices

- ✓ Be direct, calm, and respectful
 - ✓ Explain protocol-driven actions succinctly
 - ✓ Offer informed choice when allowed
 - ✓ Document decision-making clearly
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Reminder

Cultural awareness **supports**, but does not replace, medical judgment, standing orders, or patient safety obligations.

References

1. **van der Heide, A., et al. (2017).**
“Patient-centered care and shared decision-making in the Netherlands.”
BMC Health Services Research, 17: 693.
 - Discusses Dutch patients’ expectation for involvement in care decisions and preference for collaborative doctor–patient communication.
2. **Scheepers, R., et al. (2015).**
“Cultural aspects of health communication in Dutch hospitals.”
Patient Education and Counseling, 98(11), 1383–1390.
 - Highlights direct communication, patient engagement, and the value placed on autonomy and transparency.

3. **European Observatory on Health Systems and Policies – Health System Review: The Netherlands (2020).**
 - Notes egalitarian clinician–patient relationships, shared decision-making, and patient expectation for clear explanations.
<https://eurohealthobservatory.who.int/publications/i/health-system-review-netherlands-2020>
4. **van der Veen, R., & van der Heide, A. (2016).**

“Communication styles and patient participation in Dutch healthcare.”

International Journal of Integrated Care, 16(4), 1–10.

 - Emphasizes Dutch patients’ preference for clarity, directness, and asking questions regarding care rationale.
5. **World Health Organization (WHO) – Netherlands Country Profile (2020).**
 - Confirms cultural emphasis on patient autonomy, direct communication, and shared decision-making.
<https://www.who.int/countries/nld>