

HOSPITAL

Department:

			New	Revised
Category:	Policy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Regulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Agency

Title: **DO NOT RESUSCITATE (DNR) POLICY**

Number:

POLICY:

DO NOT RESUSCITATE means that in the event of a cardiac or pulmonary arrest, cardiopulmonary resuscitative measures will not be initiated or carried out. DNR is distinct from situations in which the patient is removed from life support or life sustaining measures.

Hospital recognizes its responsibility to provide ethical care while safeguarding the personal dignity, respect, and cultural, psychosocial, and spiritual values of each patient. The primary interest of the Hospital is to sustain life while respecting a patient’s wishes regarding dignity and comfort in the dying process. DNR orders are compatible with maximal therapeutic care.

Competent patients have a right to refuse treatment, including the right to refuse cardiopulmonary resuscitation.

Orders to resuscitate are a standing order of Hospital. In the event of a cardiac or respiratory arrest, emergency cardiopulmonary resuscitation measures will be initiated unless there is a specific Do Not Resuscitate order.

The State of Ohio has defined two types of DNR:

- DNR – Comfort Care (DNRCC)
- DNR – Comfort Care Arrest (DNRCCA)

Comfort Care can mean a terminally ill dying person receives care which eases pain and suffering during the final days of life, but no resuscitative measures to sustain life are implemented.

Effective Date:

Review Dates:

Department Head

V.P. Clinical Serv.

Chief of Staff
(If applicable)

Administrator

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- **DNR Comfort Care** – is a protocol that is immediately applied in which no resuscitative measures to sustain life are implemented. This protocol outlines what a healthcare professional WILL and WILL not perform.

WILL: (see Appendix or “DNR Order Form”)

WILL NOT: (see Appendix or “DNR Order Form”)

- **DNR Comfort Care Arrest** – is a protocol that is initiated when a patient experiences a cardiac or respiratory arrest.

HEALTHCARE PROFESSIONAL WILL:

- Initiate the DNR Comfort Care Protocol
- Provide any necessary care or treatment appropriate to the patient’s needs
- NOTE: Certain medical practice guidelines adopted by the

Hospital Medical Staff require the use of cardiac monitoring. Patients who wish to have a DNR order and are ordered cardiac monitoring **MUST FALL UNDER THE DNR COMFORT CARE ARREST PROTOCOL.**

DNR and Surgery – It is the policy of _____ Hospital to suspend DNR orders prior to surgical procedures. These issues are further addressed in the policy “DNR Patients Requiring Surgery.”

DNR orders that differ from the State Wide Protocol – Situations may exist in which a physician may prescribe a DNR order that is outside of the two orders designated in the State-Wide Protocol. When a physician chooses to prescribe a DNR order of this type that physician abandons the protection of the State-Wide Protocol.

Choosing to write an order other than DNR-CC or DNR-CC-A increases the potential for errors in communication. Therefore, it is the responsibility of this physician to clearly document the specific treatments and measures to be followed/restricted in the care of the patient.

A DNR order that does not abide by the practices delineated by the State-Wide protocol may not transfer well between treatment facilities.

Relationship of Advance Directives to DNR

- An individual who has been determined to be incapable of decision-making, due to a Terminal Condition or Permanently Unconscious State, may have previously directed their physician to issue a DNR-CC order in their Living Will.
- In lieu of a valid Living Will, an agent/attorney in fact, as documented in a Health Care Power of Attorney or Durable Power of Attorney for Health Care, may request/approve a DNR order for a patient who has lost decision-making capacity.

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- In the event that a patient has not completed an Advance Directive, has lost decision-making capacity, and the patient's attending physician believes that the patient is in a terminal condition or a permanently unconscious state, the physician will refer to Withholding/Withdrawing Life Sustaining Treatment.

Communication of a DNR-CC/DNR-CC-A order

- When a DNR-CC/DNR-CC-A order is written it is the responsibility of the physician, Certified Nurse Practitioner, or Certified Nurse Specialist writing that order to complete the DNR form and record the order in the Physician's Order section of the patient's chart.
- When a DNR-CC/DNR-CC-A order is prescribed via the telephone the physician will complete the DNR order form within the prescribed responsibilities for signing physician telephone orders.
- When a DNR-CC/DNR-CC-A order is prescribed by phone the nurse will be responsible to assure that the DNR-CC/DNR-CC-A form is placed in the Physician's Order section of the patient's chart for the physician's signature.
- When a DNR-CC/DNR-CC-A order is prescribed by a physician it is the nurse's responsibility to assure that the patient receives a DNR-CC/DNR-CC-A wrist band, the patient's Kardex is appropriately documented, and this information be communicated to the following shift.

Patient's Arriving at the Hospital With an Existing DNR-CC/DNR-CC-A Order

- A patient who is seen in the Emergency Department or an Out Patient area, or is admitted to the Hospital with a form, wallet card, or bracelet bearing evidence of a DNR-CC/DNR-CC-A order written by a Hospital staff physician the DNR will be honored. The patient's physician will document acknowledgement of this order and a DNR-CC/DNR-CC wrist bracelet will be provided for the patient.
- A patient who comes to the Hospital, for Out Patient care, with a form of a DNR-CC/DNR-CC-A order written by a non-staff physician the DNR will be honored.
- When a patient who comes to the Hospital with a form of DNR-CC/DNR-CC-A, who is scheduled for an invasive procedure or is to be admitted to the Hospital, the DNR-CC/DNR-CC order will be initially honored but requires acceptance by the patient's attending physician.

Support of a Patient's Family and Significant others –It is advisable to communicate the decision making process regarding DNR orders to the patient's family or significant other. As appropriate a referral should be made to Pastoral Care or Social Service to provide support to those individuals who struggle with the existence of a patient's DNR order.

Refusal to Comply

If a physician, certified nurse practitioner (CNP), or certified nurse specialist (CNS) is unable or unwilling to comply with a previously ordered DNR-CC/DNR-CC-A that physician, CNP, CNS shall communicate this to the patient, family, agent/attorney in fact (as appropriate), and the treatment team as soon as possible. As appropriate this patient may be transferred to another physician or health care facility. The affected patient will be provided appropriate medical care until such transfer can be arranged.

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Revocation of DNR-CC/DNR-CC-A Orders

- A patient with decision-making capacity may revoke a DNR-CC/DNR-CC-A order at anytime by making an oral request to revoke that order and to receive CPR.
- A DNR-CC/DNR-CC-A order may be revoked by an agent/attorney in fact of a patient who has lost decision-making capacity, **unless** the patient previously made clear her/his desire to maintain DNR status.

Process for Revocation of a DNR-CC/DNR-CC-A order – When a patient makes a request to revoke a DNR-CC or DNR-CC-A order the following actions will be followed:

1. The patient's primary physician will be called and told about the patient's desire to revoke this order. The physician must cancel the DNR order and the RN will write the telephone order. The physician must sign this order according to policy guidelines.
2. An armband, indicating a DNR order exists, will be removed from the patient.
3. The nurse receiving the request to revoke the DNR order will document this in the patient's medical record.
4. Provide support to the patient, as appropriate.
5. Remove/reverse all records of a DNR from the patient's Kardex, and communicate this change to the treatment.

When a patient wishes to change a DNR-CC order to a DNR-CC-A order.

1. The nurse will inform the patient's primary physician of the patient's desire to change this order. In such cases the RN may take the telephone order and the physician will sign this order according to policy guidelines
2. A new armband, marked DNR-CC-A, will be placed on the patient's wrist.
3. The nurse will document the patient's request and action taken.
4. Make appropriate changes to the patient's Kardex and communicate this change to the treatment team.

When an individual other than the patient or the patient's agent/attorney in fact requests revocation of a DNR order.

1. Communicate to this person that the existing order represents the patient's wishes.
2. Provide/offer support to the individual requesting this action.
3. Document this request and action taken in the patient's medical record.

Consultation In Case of Disagreement – As appropriate, issues regarding DNR may be referred to the Bioethics Advisory Committee.

Other Policies That May Be Considered

- Advance Directives
- Bioethics: Resolving Ethical Situations Involving Medical Care
- DNR Patients Requiring Surgery
- Withholding/Withdrawing Life Support for an Incompetent Patient