

GRANDVIEW MEDICAL CENTER

Critical Care/End-of-Life Decision Making

POLICY

Patients and/or their surrogates will participate in discussions with their physicians and other appropriate personnel about all aspects of their care, with a special focus on their resuscitation status and the role of an advance directive in their care.

PROCEDURES

1. *Resuscitation Status.*

a. **Admission.**

1. The patient's resuscitation status will be determined by the admitting or attending physician within 24 hours of admission and the Level of Care form will be completed.
2. The Level of Care form will be completed in consultation with the patient and/or his/her authorized surrogate.
3. If the patient is admitted with a DNR Comfort Care identification the Level of Care form will be completed to reflect this status.
4. Written documentation for DNR Comfort Care identification must be presented to the hospital within 24 hours of admission.
5. The DNR Comfort Care decision will be honored and a conversation will be conducted with the patient and/or his/her authorized surrogate about the reason for and appropriateness of the DNR.

b. **Discharge.**

1. If the patient consents to a DNR status while in the hospital, the patient's attending physician will discuss the continuation of the DNR status after the discharge within 48 hours of the patient's discharge.
2. If the patient does not want the DNR status continued, the DNR status will cease upon the patient's discharge.
3. If the patient wishes the DNR status to continue, the appropriate documentation will be completed by the patient's attending physician, according to the stipulations of Ohio's DNR Comfort Care law. Notification of this decision will be sent to the patient's physician.

2. *Advance Directive.*

a. **Admission.**

1. The patient will be asked upon admission if he/she has an advance directive. If the patient has an advance directive, a copy will be requested. The copy must be provided within 24 hours of admission and placed on the patient's chart.
2. The nurse doing the intake interview with the patient will complete the "Advance Directive and Patient Wishes Checklist," making the necessary referrals as indicated on the checklist.

b. **Discharge.**

1. If the patient does not have an advance directive during his/her hospital stay, he/she will be asked during the discharge procedure if he/she would like to develop an advance directive.
2. If the patient would like assistance with this task, Patient Relations or Pastoral Services will be contacted to provide the necessary assistance.