“DO NOT ATTEMPT RESUSCITATION”

POLICY
During the initial admission visit and as required, the patient and/or family member will notify the agency of their wishes regarding cardiopulmonary resuscitation.

PURPOSE
To provide guidelines for implementing a “Do Not Attempt Resuscitation” order indicating that in the event of an acute cardiac or a respiratory arrest, no cardiopulmonary resuscitative measures will be initiated. This shall include efforts to initiate the restoration of the natural cardiac and respiratory functions of the patient through external cardiac massage and/or assisted ventilation.

GENERAL INSTRUCTIONS
1. The RN/Care Manager is responsible to discuss the emergency protocol with the patient/family/significant other during the admission visit and obtain written authorization for necessary emergency treatments. Also assessed at this time is whether the patient has an Advance Directive.
2. In the absence of a “Do Not Attempt Resuscitation” order, staff will initiate cardiopulmonary resuscitation and summon an ambulance.
3. The attending physician may write a “Do Not Attempt Resuscitation” order under the following circumstances:
   3.1. After direct discussion with and concurrence of the patient who, in the opinion of the physician, is competent and rational and who fully understands the consequences of his/her decision; a properly drawn “living will” executed by the patient, so directing the physician to write a “Do Not Attempt Resuscitation” order is acceptable.
   3.2. If the patient is unable to make such a decision because of dementia, coma, mental retardation, etc. or is a minor, then prior to writing a “Do Not Attempt Resuscitation” order, the attending physician can obtain the concurrence of the highest order of appropriate family members*, or a duly appointed legal guardian or person holding durable power of attorney. If a properly drawn living will has been executed by the patient, the physician may act upon that will.
   3.3. If there is no next-of-kin, legal guardian, or holder of durable power of attorney, the decision to write a “Do Not Attempt Resuscitation” order can be made by the attending physician who may confer with either a social worker, another physician, chaplain or other medical professional. If a second opinion of another physician is sought, he/she should document the concurrence in the medical record.
4. The “Do Not Attempt Resuscitation” order must be written on the Physician’s Plan of Care or on a Verbal Order and signed by the attending physician.
   4.1. “Do Not Attempt Resuscitation” should be written on the patient visit file to facilitate communication.
4.2. A “Do Not Attempt Resuscitation” order may be revoked at any time should the patient, his/her next-of-kin, legal guardian, or holder of durable power of attorney change his/her mind, or should the attending physician or licensed nurse determine that the patient’s condition has changed sufficiently to warrant such a discontinuation.

* Order of priority for appropriate family members
1  Spouse
2  Adult sons and daughters (19 years of age or older)
3  Parents
4  Adult brothers and sisters (19 years of age or older)

5. The RN/Care Manager will:
5.2. Notify other disciplines of the “Do Not Attempt Resuscitation” order.
5.3. Provide emotional support when indicated to patient and/or family.
5.4. Notify physician of any change in patient’s status which would indicate need to reevaluate the “Do Not Attempt Resuscitation” order, document findings and any change in orders.