

Region IX EMS Policy

DO NOT RESUSCITATE (DNR)

Approved: 3/1/01
Rev. 3/9/10

Effective date: 3/9/10

Supersedes: 7/1/01

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Reference: EMS Rules Section 515.380 (June 10, 2000)

I. POLICY

- A. For purposes of this policy, a Do Not Resuscitate order refers to the withholding of cardiopulmonary resuscitation (CPR), electrical therapy to include pacing, cardioversion and defibrillation, tracheal intubation and manually or mechanically assisted ventilation unless otherwise stated on the DNR order.
- B. This policy shall include, but not be limited to, cardiac arrest/DNR situations arising in long-term care facilities, with hospice and home care patients, and with patients who arrest during inter-hospital transfers or transportation to or from home.

II. PROCEDURE

- A. CPR may be withheld in situations where explicit signs of biological death are present including decapitation, rigor mortis without profound hypothermia, profound dependent lividity, incineration, mummification, putrefaction, decomposition, frozen state, severe trauma in which performance of CPR is not possible, or drowning with documented submersion time of greater than one hour. CPR shall be withheld if the patient has been declared dead by the coroner, medical examiner, or a licensed physician. Documentation shall include recording such information on the run sheet and requesting the physician or coroner to sign the run sheet (if applicable).
- B. For situations not covered by this policy or where circumstances or the order is unclear, resuscitative procedures shall be followed when indicated unless a valid DNR order is present or is issued by medical direction.
- C. The Illinois Department of Public Health approved "Do Not Resuscitate (DNR) Order" form which has not been revoked shall be the expected and accepted document for use in the prehospital setting.

In the absence of a completed IDPH approved form a valid DNR order shall consist of a written document, which has not been revoked, containing at least the following information:

- 1. Name of the patient;
 - 2. Name and signature of attending physician;
 - 3. Effective date: The validity of an order will not expire unless modified or revoked at any time by the maker;
 - 4. The words "Do Not Resuscitate" or "DNR" (pre-checked on form);
 - 5. Evidence of consent - either:
 - a. signature of patient,
 - b. signature of legal guardian, or
 - c. signature of durable power of attorney for health care agent (see Durable Power of Attorney of Health care policy), or
 - d. signature of surrogate decision-maker (an individual previously named by a physician in accordance with the Illinois Health Care Surrogate Act to make decisions on behalf of the patient; and).
 - 6. 1 witness signature.
- D. A living will by itself cannot be recognized by prehospital care providers, however, a living will or advanced directive attached to a DNR order may be considered evidence of patient consent.

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- E. Revocation of a DNR order shall be made in one or more of the following ways:
 - 1. The order is physically destroyed or verbally rescinded by the physician who signed the order, or
 - 2. The order is physically destroyed or verbally rescinded by the person who gave consent to the order.
- F. EMS personnel shall make a reasonable attempt to verify the identify of the patient named in the DNR order (for example, identification by another person or an identifying bracelet).
- G. EMS personnel will act on DNR orders only after consultation with an appropriate System hospital. ECRNs may approve DNR orders unless the situation is unclear, at which time consultation with an ED physician is indicated for clarification.
- H. All levels of EMTs and prehospital RNs will be authorized to respond to a valid DNR order.
- I. If appropriate, the coroner or medical examiner will be notified in accordance with System policy.
- J. Continuing education will address implementation of DNR orders annually or as appropriate.
- K. All cases with DNR orders implemented will be reviewed as a component of the System's quality improvement program. Each System will submit an annual report to the Illinois Department of Public Health indicating issues or problems that have been identified and the System's responses to those issues or problems.