

DO NOT RESUSCITATE (DNR)

1. Purpose: To honor the patient's end of life directives.
2. Definitions
 - 2.1. "Declaration" means a witnessed document, statement, or expression voluntarily made by the patient, authorizing the withholding or withdrawal of life-sustaining procedures. A declaration may be made in writing, orally, or by other means of nonverbal communication (from La RS 1299.58.2.)
3. Procedure:
 - 3.1. In the event of cardiopulmonary arrest, LaSalle Ambulance personnel WILL NOT attempt cardiopulmonary resuscitation (CPR), including cardiac compressions, endotracheal intubation (or King LTS-D) and defibrillation, under any one of the following specific circumstances:
 - 3.1.1. A declaration made by:
 - 3.1.1.1. the patient.
 - 3.1.1.2. legal medical power of attorney.
 - 3.1.1.3. a healthcare provider, such as the nursing home or home health care setting.
 - 3.1.1.4. Any declaration must be substantiated with the proper legal documentation.
 - 3.1.2. A qualified "Living Will" declaration signed by three people: the Patient (or patient's surrogate) and two Witnesses. The living will declaration becomes qualified only AFTER two physicians have certified the patient to have a terminal and/or irreversible condition.
 - 3.1.3. A "Do Not Resuscitate" bracelet issued by the Secretary of State.
 - 3.1.4. A verbal order not to resuscitate given to AASI personnel (ideally, via recorded line) by the responsible attending physician or medical control.
 - 3.2. AASI personnel must personally view documents or bracelet.
 - 3.3. If resuscitation is in progress upon arrival of AASI personnel AND any one of the above circumstances exists, CPR will be discontinued and reasons clearly documented in the ePCR.
 - 3.4. **IF IN DOUBT, BEGIN RESUSCITATION EFFORTS!**
4. Documentation: as usual
5. Revocation of DNR Policy
 - 5.1. Purpose: To honor the patient's end of life directives.
 - 5.2. Procedure:
 - 5.2.1. Any one of the following circumstances will REVOKE the above Do Not Resuscitate order:
 - 5.2.1.1. By an oral or nonverbal expression by the patient of the intent to revoke the declaration. □
 - 5.2.1.2. The patient's responsible physician requests that resuscitation efforts be undertaken.
 - 5.2.1.3. AASI personnel have strong doubts about carrying out the "Do Not Resuscitate" order. Transport immediately to the emergency department.
6. Treatment Options for DNR Patients
 - 6.1. Purpose: To provide end-of-life comfort.

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- 6.2. Procedure:
 - 6.2.1. Positioning for comfort
 - 6.2.2. Airway control and suctioning
 - 6.2.3. IV line for hydration and analgesics (MD order)
 - 6.2.4. Oxygen
 - 6.2.5. Other such measures as deemed appropriate by MD order
- 7. Transport Considerations:
 - 7.1. If a patient with a valid DNR expires during transport, continue transport to the initial destination.
 - 7.1.1. If a hospital is the destination, notification should be made to the hospital informing them of the situation.
 - 7.1.2. If the destination is a residence or other facility, notification of the sending hospital should be made informing them of the change in the patient's condition and transport should continue.
 - 7.1.2.1. In cases of lengthy transports and/or transports across parish lines, if a patient with a valid DNR expires, the crew should immediately pull over in a safe place, notify the communications center and the law enforcement agency for the jurisdiction where the patient died. Upon notification of the law enforcement agency to determine the disposition of the body. This may include: continuing transport to the final destination, transport to a funeral home, transport to a hospital or transport to a coroner's office. Keep the communications center apprised of the situation.