

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	2085.20
	<u>PROGRAM DOCUMENT:</u> Do Not Resuscitate (DNR)	Draft Date:	11/04/99
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Signature on File

Signature on File

 EMS Medical Director

 EMS Administrator

Purpose:

To establish criteria for EMTs and Paramedics in Sacramento County to determine the appropriateness of either:

- A. Withholding resuscitative measures in accordance with the patient's wishes; or
- B. To utilize direct medical oversight for the pronouncement of victims of cardiac arrest while in the prehospital setting.

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Definitions:

- A. Emergency Medical Technician (EMT) shall apply to EMTs and Paramedics.
- B. Do not resuscitate (DNR) means the patient will not receive chest compressions, defibrillation, assisted ventilation, endotracheal intubation, or cardiotoxic medications. This does not exclude other treatments, especially those treatments directed to the pain and comfort of the patient.
- C. The State of California Emergency Medical Services Authority (EMSA) approved form Physician Orders for Life-Sustaining Treatment (POLST) is recommended for documenting do not resuscitate orders.
 - a. Comfort-Focused Treatment (as defined in the POLST form) “primary goal of maximizing comfort” (eg, relieving pain, using oxygen, suctioning, and manual treatment of airway obstruction).
 - b. Selective Treatment (as defined in the POLST form) “goal of treating medical conditions while avoiding burdensome measures (eg, administer IV fluids, use of CPAP or BiPAP, but DO NOT INTUBATE)
- D. DNR Medallion: MedicAlert® medallion, which states “Do Not Resuscitate - EMS” (or similar medallion as approved by the EMSA).
- E. Aid-in-Dying Drug: A drug determined and prescribed by a physician for a qualified individual, which the qualified individual may choose to self-administer to bring about death due to terminal illness. The prescribed drug may take effect within minutes to several days after self-administration.
- F. End of Life Option Act: This California state law authorizes an adult, eighteen (18) years or older, who meets certain qualifications and who has been determined by attending

physician to be suffering from a terminal disease to make a request for an “aid-in-dying drug” prescribed for the purpose of ending life in a humane and dignified manner.

Protocol:

- A. All patients who do not meet the "Determination of Death Criteria" as outlined in SCEMSA PD #2033 – Determination of Death or criteria outlined in this policy shall receive resuscitation efforts.
- B. Any EMT or Paramedic who is presented with one of the following at the initiation of patient care or at any time during patient care may discontinue resuscitation efforts:
 1. An EMSA POLST form
 2. A completed Prehospital DNR Request Form stating, "Do Not Resuscitate," "No Code," or "No CPR."
 3. A written or electronic order stating, "Do Not Resuscitate," "No Code," or "No CPR" signed by a physician, with the patient's name and date the order was signed;
 4. A written Advance Health Care Directive document or wallet card, including the DNR portion of a “Living Will” or equivalent, identifying the designated agent who declines resuscitation on behalf of the patient. Resuscitation attempts shall not be delayed by attempts to contact the designated agent
 5. The patient is wearing a DNR medallion
- C. If the patient is conscious and states he/she wishes resuscitative measures, all DNR orders shall be ignored.
- D. The presence of a DNR order, the physician, nurse practitioner, or physician assistant’s name signing the order, and the date of the order are to be documented on the Patient Care Report (EMS Form).
- E. The DNR form (original or copy), DNR medallion, or a copy of the valid DNR order from the patient's medical record shall be taken to the hospital with the patient.
- F. If there are any questions regarding a patient’s DNR status, EMS shall provide for patient comfort, including basic life support cardiopulmonary resuscitation, if indicated, and utilize direct medical oversight.
- G. Paramedic providers shall follow the medical interventions indicated on the POLST form within their local scope of practice. Utilize direct medical oversight for any questions.
- H. DNR Patients with POLST forms that indicate “Selective treatment, request medical transfer **ONLY** if comfort needs cannot be met at current location” or “Comfort-focused treatment” may qualify for no transportation if all of the following apply:
 1. After the assessment, the medic determines that the patient’s comfort needs are being met at their current location.
 2. The patient or DPOA agrees that the patient’s needs are being met at their current location.
 3. Discussion with direct medical control indicates that the patient’s comfort needs are being met at their current location.

NOTES:

In the event that a DNR patient being transported dies en route, the following shall occur:

- Do not cross a county line, as deaths need to be reported and processed in the county in which they occur.

- If the destination was a hospital, continue on to that facility (if it's in the same county), or select a new destination facility in the same county.
- If the transport was from a hospital to another destination (care facility, home, etc.), return to the hospital of origin if in the same county, or continue on to the original destination if in the same county as the expiration.
- If the receiving facility or home will not accept the deceased, contact the coroner to assist with disposition.

End of Life Option Act:

- A. Obtain a copy of the final attestation and attach it with the EMS Report Form when possible.

References:

[EMSA guidelines for EMS Personnel regarding DNR, Directive Number #311, 6th revision, dated 2018](#)

[EMSA POLST Form #111B \(Effective 04/01/2017\)](#)

[Emergency Medical Services Prehospital Do Not Resuscitate \(DNR\) Form Information](#)

[Emergency Medical Services Prehospital DO NOT RESUSCITATE \(DNR\) Form](#)

California Probate Code Division 4.7, Part 2
Assembly Bill (AB) - 15

Cross Reference: PD# 2033 – Determination of Death
PD# 2101- Patient Initiated Refusal of EMS Assessment, Treatment, and/or Transport

End of Life Option

