

Washington Township Fire Department Standard Operating Procedure

Division 200: Emergency Operations
Section 202: Emergency Medical Services
Subject 202.02: Ohio D.N.R. Comfort Care
Supersedes:



Approved By:

Date: April 13, 2000

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PURPOSE:

It is widely recognized that there are circumstances where life-prolonging treatment may not be appropriate. The purpose of this policy is to explain and give guidance to EMS personnel responding to calls involving the withholding of full and/or partial treatment for terminally ill patients. This policy will meet the guidelines set forth for Ohio DNR Comfort Care, under HB 354, implemented May 20, 1999.

RESPONSIBILITY:

It shall be the responsibility of each member of the Washington Township Fire Department that acts in the capacity of a first responder or care giver, with the intention of providing medical care, to fully understand and follow this protocol. Good judgement, the needs of the patient and the patient's physician should be utilized when making the decision of whether to begin life support.

INFORMATION:

DEFINITIONS:

- A. DNR – Do not resuscitate.
- B. DNR Comfort Care – Specifies what emergency medical services and other care providers may or may not do when providing care.
- C. DNR Comfort Care - Arrest – This protocol is initiated upon the cessation of a palpable pulse or respirations.
- D. Emergency Medical Service Personnel (EMS) – Includes all levels of EMT's and Police Officers and First Responders.
- E. Identification – In the law, refers to the ways of determining that a patient has a DNR order.
- F. Verification – Is the means used to confirm that the patient is the same individual as specified on the DNR order.
- G. CPR – For the DNR Comfort Care patient the State defines CPR as any one or more of the following:

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Chest Compressions	Artificial Airways (oral/nasal or endotracheal)
Resuscitative Drugs	Defibrillation/Cardioversion
Active Respiratory Assistance	Resuscitative IV
Cardiac Monitoring	

INTENT of DNR Comfort Care Protocol:

To allow terminally ill persons the right to die with dignity, in comfort, and with their wishes respected. Comfort Care means a dying person receives care that eases pain and suffering during the final days or hours of life, but no resuscitative measures to sustain life are to be implemented. DNR Comfort Care does not mean, “do not treat”.

If a person with a DNR Comfort Care order suffers an illness or injury unrelated to the DNR order, normal treatment and care will be given.

Be aware that DNR orders are mainly written for terminally ill patients that have made a decision regarding their care. The patient can revoke this DNR decision at any time regardless of their age.

PROCEDURE:

Ohio has a DNR Comfort Care Program, which confirms the patient’s right to refuse CPR when he/she has a terminal condition. This is implemented by a medical order signed by a physician or a certified practitioner.

DNR Comfort Care has two options: Comfort Care or Comfort Care-Arrest. The two are very similar differing only at the point of plan initiation. Comfort Care and Comfort Care Arrest are essentially two benchmarks for the DNR protocol.

Comfort Care

If a patient has the DNR Comfort Care option designated on the order sheet, care will be provided to ease pain and suffering but no resuscitation methods are to be initiated. The standard Comfort Care option allows the patient to receive comforting care only without aggressive drug or procedural therapy. For purposes of DNR Comfort Care, following is a list of treatment protocols that can be used to ease pain and suffering and a list of treatment protocols that cannot be used to postpone death or prolong a patient’s life.

WILL	WILL NOT
Suction the Airway	Administer Chest Compressions
Administer Oxygen	Insert Artificial Airway
Place in Position of Comfort	Administer Resuscitative Drugs
Splint or Immobilize	Defibrillate or Cardiovert

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Control Bleeding	Provide Respiratory Assistance (other than O2 administration)
Provide Pain Medication	Initiate Resuscitative IV
Provide Emotional Support	Initiate Cardiac Monitoring
Contact Appropriate Health Care Providers	

A person that has been identified as a DNR Comfort Care patient is to receive care following the protocols listed above. This care is to be continued during transport until such time as the patient is delivered to a health care facility or the patient becomes pulseless and apneic. If this occurs, then all treatment should be discontinued and the receiving hospital should be notified.

Comfort Care-Arrest

If the DNR Comfort Care-Arrest option is specified, the patient will receive all care up to the point of cardiac or respiratory arrest. Upon cardiac or respiratory arrest, all efforts to treat are stopped; this includes all components of CPR as listed in the definition section above, and the Comfort Care protocol is initiated.

Even if the family demands action, care is to be terminated. The patient's wishes are the final determining factor for DNR status. The patient, regardless of age, can at any time revoke a DNR order.

EMS personnel should provide comfort and supportive measures to the patient and aid the family in an attempt to understand the patient's wishes for not wanting to be resuscitated.

IDENTIFICATION:

Currently there are a number of forms that identify a patient with DNR status. As of May 20, 1999, a State Law was implemented that described practices to follow in managing certain patients. The State DNR Comfort Care order can serve as evidence a person is a DNR Comfort Care patient and desires the statewide standard DNR Comfort Care protocol to be used at the appropriate time.

These patients are identified with a Comfort Care Identification Form or a Wallet Identification Card. Both of these types of identification will indicate if the person is DNR Comfort Care or DNR Comfort Care Arrest. Each will also contain the patient name and the physician name and phone number. A copy of each is attached.

Other types of identification may include a wrist band or neck bracelet. No matter what type of identification is used, the State recognized DNR order would contain the State Logo.

Other DNR Identification:

Since not all written DNR orders will be in the State of Ohio's DNR Comfort Care format, crews may encounter a variety of different written DNR orders. In this situation, medical control should be contacted immediately for direction.

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If in a Health Care facility and the caregiver shows the EMS provider physician's written signature and DNR order documented on the patient's chart, it must be honored.

If in a Health Care facility the EMS provider is presented with a living will signed by two physicians, it must be honored. Both of these instances apply only in a Health Care facility (i.e. hospital, nursing home).

Remember that the Law only provides immunity regarding the DNR Comfort Care order if protocols are followed. The State DNR order is the Law. It is the only Do Not Resuscitate order that provides immunity to health care professionals that comply with the law.

VERIFICATION:

If the following "reasonable steps" are used to confirm that the patient is the same patient specified in the DNR order, there will be no liability for civil damages (lawsuit) for withholding or discontinuing CPR provided the Ohio protocols are followed.

Reasonable Steps for verification include:

1. Verification by Family, Friend or Caregiver
2. Patient Known by EMS or Physician
3. Patient is wearing a healthcare facility ID band
4. Patient's Drivers License, passport, or other ID with name and photo

If you cannot verify the identity of a patient with DNR Identification after reasonable efforts, you still should follow this protocol. In an emergency situation, the emergency service personnel are not required to search a person to determine if the person possesses DNR identification.

If CPR is provided unknowingly to a person in an emergency situation that possesses DNR identification, and the emergency personnel do not have reasonable cause to believe that the person possesses DNR identification, the emergency service personnel are not subject to civil or criminal prosecution.

If the patient's DNR Comfort Care - Arrest status is verified after CPR has been initiated, CPR must be discontinued. In this situation it is not necessary for the EMS personnel to obtain a physician's order to stop CPR if DNR identification is found.

REVOCATION:

The patient may revoke a DNR order at any time regardless of age. Methods in which a DNR order may be revoked are:

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1. Patient may revoke the order by:
 - a. Verbal Communication
 - b. Written Communication
 - c. Destroying all DNR Comfort Care identification
2. The attending physician may revoke a DNR Comfort Care status following reasonable medical standards and communicating the revocation to the EMS providers.
3. If a person demanding CPR holds Durable Power of Attorney for **Healthcare** (DPA-HC) they may be able to request CPR for the patient. The person must provide the EMS personnel upon request with the DPA-HC. Next the identity of the person must be verified and if all is in order conform to their wishes. If they cannot produce the patient's DPA-HC form, the DNR order must be complied with.

No person can conceal, cancel, deface or obliterate the DNR identification of another person without their consent. A DNR order or a Revocation of a DNR order cannot be forged or falsified. Doing so is a crime.

DOCUMENTATION:

Record the patient's name, gender, age and attending physician's name. Record any other patient information that may have been gathered. In the narrative explain when the DNR order was found and what steps were taken to verify the identity of the patient.

If a verbal order is obtained from a physician on the scene, EMS personnel must verify the physician's identity and document verification. Obtain the order in writing from the physician or have him/her sign such an order on the run sheet.

Document the assessment and any treatment provided. The DNR order or a copy should accompany the run report.

If the patient revoked the DNR order, this must be documented and the receiving hospital should be advised that the patient revoked a DNR order.

REMOVALS:

If in the course of care prior to removal of an identified DNR patient, the patient suddenly lapses into a pulseless and/or apneic state, treatment should be discontinued and the patient should not be removed from the scene. The proper police jurisdiction must be notified and the crew will secure the scene until such time as the police arrive.

If the patient was a DNR Comfort Care – Arrest patient and treatment prior to arrest included intubation or IV/drug therapy, the IV line and intubation tube must be left in place as treatment is discontinued.

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If during transport the DNR patient lapses into a pulseless apneic state, discontinue care and contact the receiving health care facility to advise of the situation. Continue transport to that facility.

Restocking supplies should occur at the hospital facility. Document supplies used for the hospital record.