Questions to be addressed:
1. What is a Do Not Resuscitate (DNR) order?
2. How do you know there is a DNR order?
3. Can a DNR order be revoked?
4. In what healthcare settings can it be honored?
5. What emergency care steps does it affect and how does one know?
6. How should a professional, certified lay and lay rescuer trained by the American Red Cross respond to a DNR order?
7. Does a professional rescuer fail to provide the standard of care if they follow a DNR order?

Answers:

Overview – What is a Do Not Resuscitate (DNR) Order
DNR orders are intended to direct the care of a person in the specific setting of either respiratory or cardiac arrest. DNR orders are very specific orders which express a patient's denial of consent for specific interventions limited to cardiopulmonary resuscitation for either respiratory or cardiac arrest. As such they only apply to the following specific interventions in the setting of respiratory or cardiac arrest:

- Airway - positioning, adjuncts and intubations
- Breathing - assisted ventilations
- Circulation - cardiac compressions, defibrillation and cardiac arrest medications

Up to that point of either respiratory or cardiac arrest the DNR order would not apply and rescuers should provide the normal care for any conditions that they identify.

In most states, a DNR is a physician's order not to resuscitate if a patient goes into cardiac or pulmonary arrest. It is part of the prescribed medical treatment plan and must have a physician's signature. Issues surrounding Do Not Resuscitate (DNR) orders are complex, and the laws and regulations regarding them vary from state to state. For these reasons, the American Red Cross advises all professional and certified lay rescuers to receive specific training from their employer, agency, or medical director. In addition lay rescuers are encouraged to check what are the local laws and regulations. However, there are some general principles which all rescuers should be aware of, and can use to guide their practice.

End-of-Life Care legislation is in place across the country serving as a mechanism to address two competing interests that are equally valid. Specifically, it allows patients to be involved in their own health care decision-making and protects health care personnel from liability for honoring the patients' wishes. Ethical principles require that rescuers respect a person’s right to make decisions regarding their health care. This usually involves obtaining their consent. However, sometimes a person is either unconscious or otherwise incapacitated. In these cases, advanced directives, such as health care proxies, living wills, and DNR orders, provide a mechanism by which individuals can make their wishes known when they are unable to speak for themselves. In addition advance directives allow those responsible for the care of the others such as a minor or
adult lacking the capacity for decisions to make end of life decisions prior to the time when the decision is needed. Of course, in the absence of an applicable advanced directive, consent for emergency treatment is implied.

**How do you know there is a DNR order?**
In most cases the family, a care taker or healthcare provider will inform you that a DNR is in place.

A Do Not Resuscitate Order (DNR) is written on a form developed, in most States, by the individual State’s Department of Health or State EMS Office to identify people who do not wish to be resuscitated in the event of respiratory or cardiac arrest. In the case of in-patient at hospitals and long term care facilities, the DNR may be on a form which complies with state laws and regulations but has been designed by the facility. In some states there are both hospital and in-hospital forms. The properly completed form will be signed by the competent patient, or the patient's representative, signed by a licensed physician on a specific form developed and approved by the respective State.

Unless you are provided with written documentation or your state laws and regulations allow acceptance of oral verification (which most states laws do not), you must perform all procedures as you would in the absence of a DNR.

In some states, a patient identification device, in the form a bracelet or smaller version of the form can be worn on a chain around the neck, clipped to a key chain or to clothing/ bed, etc. so it can travel with the patient. It is equally as valid as the DNR form and can be presented to emergency medical services when they arrive on scene and is designed to allow the patient to move between settings with one document.

**Can a DNR order be revoked?**
Review of individual state laws for specific criteria is necessary, generally, the DNR order can be revoked at any time either orally or in writing, by physical destruction, by failure to present it, or by orally expressing a contrary intent by the patient or the patient's health care surrogate. In the out of hospital setting it may be difficult to determine who is the actual surrogate and likely the question has arisen because they are in cardiac or respiratory arrest and con not express their own wishes, as such if there is any doubt regarding revocation of the DNR order or someone verbally requests revocation, begin normal care procedures.

**In what health care settings is the DNR order honored?**
The DNR is honored in most health care settings, including hospices, adult family care homes, assisted living facilities, emergency departments, nursing homes, home health agencies and in hospitals. State laws further provide that health care providers employed in these health care settings may withhold or withdraw cardiopulmonary resuscitation if presented with a DNR and be immune from criminal prosecution or civil liability. In addition most state laws and regulations allow DNR orders to be honored by prehospital providers. In these instances when the DNR is presented to an emergency medical technician in a setting other than a health care facility, the form may be honored.
What interventions and actions does it affect?
Even in the setting of a DNR order, many family members call 9-1-1 to control pain and to make sure the patient is comfortable. Others may want the patient to be transported to the hospital so the attending physician will be present. In addition when seeing the patient in trouble even with a DNR order bystanders and family may call for help from those present or activate EMS.

A DNR order only applies in the event of cardiac or respiratory arrest. It is an order based on the patients wishes that in the setting of cardiac or respiratory arrest, that actions for cardiopulmonary resuscitation will not be administer. This would include:
- Airway - positioning, adjuncts and intubations
- Breathing - assisted ventilations
- Circulation - cardiac compressions, defibrillation and cardiac arrest medications

Prior to respiratory or cardiac arrest all care is as would usually be provided. In addition a DNR order does not affect comfort care measures, such as oxygen administration, and pain management.

Review of individual state and local laws, as well as local protocols is essential for compliance. Questions regarding DNR orders should be directed to the state regulating agency or State EMS Office.

How does a DNR apply to individuals trained by the American Red Cross?
Individuals instructed by the American Red Cross should be made aware of the following:
- The concept of a DNR order
- The procedures to which it applies and the setting in which it applies
- To inquire regarding their states advanced directives/DNR Laws.

In the out of hospital setting which would apply to individuals trained by the American Red Cross, if there is any doubt as to whether a DNR is valid or may have been revoked, care should proceed as it would in the absent of DNR including activation of EMS and transport to a hospital. The hospital is better equipped and has additional resources to determine the validity and applicability of a DNR order then are available in the out of hospital setting.

Professional, certified lay and lay rescuers are required to comply with state laws regarding DNR. Professional and workplace providers should receive specific training from their employer, agency, or Medical Director regarding DNR orders.

Does a professional rescuer fail to provide the standard of care if they follow a DNR order?
A professional rescuer who follows a DNR order is actually complying with the standard of care by respecting the patient’s wishes, respecting the patient’s denial of consent for cardiopulmonary resuscitation in the setting of either respiratory or cardiac arrest and complying with the physician’s order for DNR.