

Pre-Hospital Medical Care Directives

503.1 PURPOSE AND SCOPE

This policy identifies the circumstances and types of documents required for district Emergency Medical Services (EMS) members to withhold or withdraw resuscitative or life-sustaining measures based on Arizona law (ARS § 36-3251).

Nothing in this policy should be interpreted to limit EMS members from relieving an airway obstruction.

503.1.1 DEFINITIONS

Definitions related to this policy include:

Agent - A person designated in a written power of attorney for health care to make health care decisions (ARS § 36-3201).

Do Not Resuscitate (DNR) Bracelet - A medical alert bracelet worn on the wrist or ankle that states "Do Not Resuscitate" and is printed on an orange background (ARS § 36-3251).

Palliative care - The total care of patients who are not responsive to curative treatment, designed to achieve the highest quality of life possible.

Pre-Hospital Medical Care Directive (or Do Not Resuscitate (DNR)) - A document executed and used to give health care instructions, including directions to withhold or withdraw life-sustaining measures and CPR. A valid Pre-Hospital Medical Care Directive (PMCD) must contain the date of its execution, signature of the patient or of an agent in the patient's name, and be acknowledged by a licensed health care provider. PMCDs may be either letter or wallet size and shall be printed on an orange background (ARS § 36-3251).

PMCDs are commonly referred to as Do Not Resuscitate (DNR) requests.

503.2 POLICY

It is the policy of the Blue Ridge Fire District that EMS members honor DNR requests to withhold or withdraw resuscitative measures.

503.3 PROCEDURES

The following guidelines should be used by members who are presented with a DNR request:

- (a) All EMS members shall honor a DNR request when it can be reasonably established that the patient is the subject of the DNR request and either:
 1. When EMS members have identified a DNR request or a DNR bracelet as defined in this policy.
 2. When EMS members have personally seen the DNR request in the patient's medical record in a health care facility and they reasonably believe it has not been revoked.

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- (b) All DNR patients should receive non-resuscitation-related palliative care and other comfort measures, as would any other person.
- (c) A DNR request shall be disregarded if the patient requests resuscitative measures.
- (d) When EMS members honor a DNR request, they should note on the Patient Care Report (PCR) that a DNR request was presented and honored, and shall document the circumstances surrounding the DNR request on a PCR.
- (e) Base hospital contact should be made, the base hospital physician consulted and resuscitation initiated:
 - 1. If there are any questions concerning the validity of the DNR request.
 - 2. If a DNR request is incomplete or not signed.
 - 3. When a document other than those noted in this policy is presented.
 - 4. Any time EMS members have concerns or require assistance.
- (f) All DNR patients who are in cardiopulmonary arrest should not be transported. EMS members shall contact local law enforcement and/or the coroner's office to report the death and should support family members on-scene, as appropriate.
- (g) All DNR patients who decline transport to the hospital, including patients for whom transport is declined on their behalf, should not be transported. EMS members should make reasonable efforts to preserve the patient's privacy, dignity and comfort before leaving the scene.
- (h) If a DNR patient is transported to a hospital, the following shall apply:
 - 1. A valid DNR request shall be honored during transport of the patient.
 - 2. The DNR request shall accompany the patient.
 - 3. The agent (if applicable) should accompany the patient to the hospital.