

What is the “Do-Not-Resuscitate” Program?

- The Saginaw Valley Medical Control Authority recognizes that some patients, particularly those with terminal illnesses, may not desire the full spectrum of pre-hospital and emergency medical services. Likewise, these patients may not receive medical benefit from these efforts.

Given the constraints of emergency medical practice, the Saginaw Valley Medical Control Authority and the Medical Control Board wish to accommodate and support the needs of these patients and their physicians.

- The Public Act of 1996, known as the “Michigan Do-Not-Resuscitate Act” is an act to provide for the execution of a “Do-Not-Resuscitate” order for a patient in a setting outside of a hospital, nursing home, or a mental health facility owned or operated by the department of community health . . .”

Keep in mind, the Public Act is for pre-hospital care only. Once you have presented to the hospital you are no longer covered under the Public Act. It is advisable and highly recommended for persons who desire the “Do-Not-Resuscitate” status to have an Advance Directive in place.

- An Advance Directive is a written document prepared by you stating how you want medical decisions made if you lose the ability to make decisions for yourself. The two most commonly prepared Advance Directives are:
 1. A “Living Will”
 2. A “Durable Power of Attorney for Health Care”

The value of an Advance Directive is that it allows you to state your choices for health care or to name someone to make those choices for you, if you become unable to make decisions about your medical treatment. In short, an Advance Directive ensures your right to accept or refuse medical care. Advance Directives may be cancelled at any time. However, it is important to make sure that someone, either your lawyer or a family member, knows that you have an Advance Directive and where it is located.

- The purpose of the “Do-Not-Resuscitate” Policy is to facilitate kind, humane, and compassionate service for those patients with irreversible and irreparable disease for whom death is imminent and/or unavoidable.
- The patient or his legally responsible party have the right to cancel the “Do-Not-Resuscitate” status and retract this request.
- The Policy is intended to relieve pre-hospital care providers of the burden and responsibility for making moral, legal and ethical decisions in the field regarding the patient competency, authenticity of documents, and legality of requests and relationships.
- EMS providers shall not attempt resuscitation of any individual who meets ALL of the following criteria:
 - ❖ 18 years of age or older
 - ❖ Patient has no vital signs. Evidence of pulse or Respiration

- ❖ Patient is wearing a “Do-Not-Resuscitate” identification bracelet which is clearly imprinted with the words “Do-Not-Resuscitate Order”, name and address of declarant, and the name and telephone number of declarant’s attending physician

- The Procedure for a patient who desires the “Do-Not-Resuscitate” order is:
 - ❖ Patient must complete the application and return it to the Saginaw Valley Medical Control Authority at least 10 business days prior to the desired implementation of this service.

 - ❖ The EMS Medical Director (Dr. Rivera) will sign the application

 - ❖ The approved forms will be distributed to:
 - a. The Emergency Medical Control Telecommunications Center currently located at MMR Dispatch
 - b. The Emergency Departments at Covenant and Saint Mary’s (the DNR Program with Caro and Hills & Dales is currently being developed)
 - c. The attending physician
 - d. The Nursing Home, if indicated
 - e. The patient, along with the Purple wrist identification band.

 - ❖ The private/attending physician must sign the application.

- ❖ The patient must sign the application
- ❖ If the patient is unable to sign the application, the patient advocate may sign the application.
- ❖ The “Do-Not-Resuscitate” patient may be identified either by the purple identification wrist band or the signed “Do-Not-Resuscitate” order. (or, the DNR Order must be presented at the time of EMS arrival).
- ❖ Any suspicion of foul play, homicide, suicide or iatrogenic event nullifies the “Do-Not-Resuscitate” care status.
- ❖ The responding pre-hospital care provider will notify the receiving Emergency Department of the patient’s “Do-Not-Resuscitate” status as soon as possible and appropriate during the radio report.
- ❖ In the event that an identified DNR patient cannot be transported to the designated preferred hospital, the DNR information will be transmitted to the receiving hospital Emergency Department by MEDCOM.
- ❖ All decisions regarding emergency care and treatment will ultimately be made by the emergency department base station physician providing on-line medical direction to the pre-hospital care provider at the time of the event.
- ❖ No patient will be refused transportation to the hospital on the basis of a DNR patient care status.
- ❖ The DNR services requested expires upon revocation by the patient and/or legal guardian.

- Hospitalized Patients: If the hospitalized patient requests a DNR patient status and requires ambulance transportation, the procedure is as follows:
- ❖ Contact any Discharge Planner/Social Work Group for a “SVMCA Purple Prescription Form”
 - ❖ The Discharge Planner or appropriate personnel staff will assist the patient and family with completion of the form
 - ❖ The “Prescription” must be signed by the patient or designee, the attending physician, and a witness with the date completed
 - ❖ The “Prescription” form is to be used for ambulance transport at the time of discharge. If the patient wishes to be enrolled in the DNR program, contact the Office of EMS for the appropriate forms. Formal application for the pre-hospital DNR program must be initiated at the time of discharge. The Purple Form expires after 7 days after discharge. This is a “temporary” DNR status.
 - ❖ The purple “SVMCA Prescription” form must be presented to the pre-hospital care providers prior to ambulance transportation. The “SVMCA Prescription” form will be attached to the white original SVMCA form
 - ❖ If the patient expires in Saginaw/Tuscola counties, EMS Personnel will contact and return to the original hospital. If the patient expires outside Saginaw/Tuscola Counties, EMS Personnel will contact the nearest hospital emergency department for medical direction

- Completion of the DNR Form:
- What happens after the form is processed:
- Religious “Do-Not-Resuscitate” Forms: An individual who is 18 years of age or older, of sound mind, and an adherent of a church or religious denomination whose members depend upon spiritual means through prayer alone for healing may execute a DNR order on his or her own behalf. A patient advocate may also execute a DNR order on behalf of an individual 18 years of age or older.
- A life insurer may not do any of the following because of the execution or implementation of a DNR order:
 - ❖ Refuse to provide or continue coverage to the declarant
 - ❖ Charge the declarant a higher premium
 - ❖ Offer the declarant different policy terms because the declarant has an executed order
 - ❖ Consider the terms of an existing policy of life insurance to have been breached or modified
 - ❖ Invoke a suicide or intentional death exemption or exclusion in a policy covering the declarant