

# Sierra – Sacramento Valley EMS Agency Treatment Protocol

**DNR, POLST & End Of Life Option Act** 

Effective: 12/01/2024

G-3

Approval: Troy M. Falck, MD – Medical Director

Next Review: 07/2027

Approval: John Poland – Executive Director

### **DEFINITIONS**

**Advance Health Care Directive (AHCD) –** A document that allows an individual to provide healthcare instructions &/or appoint an agent to make healthcare decisions when they are unable or prefer to have someone speak for them.

**Agent or Attorney-In-Fact** – An individual designated in a power of attorney for health care to make a health care decision for the pt, regardless of whether the person is known as an agent or attorney-in-fact, or by some other term.

**Aid-in-Dying Drug** – A drug prescribed by a physician for a qualified individual, which the qualified individual may choose to self-administer to bring about their death.

**Do Not Resuscitate (DNR)** – A request to withhold interventions to restore cardiac activity & respirations (no chest compressions, defibrillation, assisted ventilation, advanced airways, or cardiotonic medications).

**DNR Wrist or Neck Medallion –** A MedicAlert® or other approved wrist or neck medallion, engraved with the words "Do Not Resuscitate", and a patient ID number.

**Durable Power of Attorney for Health Care (DPAHC)** – A document that allows an individual to appoint an agent/attorney-in-fact to make health care decisions if they become incapacitated. The DPAHC must be immediately available and the agent/attorney-in-fact must be physically present. Decisions made by the agent/attorney-in-fact must be within the limits set by the DPAHC, if any.

**EMSA/CMA Prehospital DNR Form** – A form developed by the California Emergency Medical Services Authority (EMSA) and California Medical Association (CMA) for the purpose of instructing EMS personnel to forgo resuscitation attempts in the event of a pt's cardiopulmonary arrest in the out of hospital setting. The form must be signed and dated by a physician and pt/representative to be valid.

**End of Life Option Act** – A law authorizing an adult, 18 years or older, who meets certain qualifications and who has been determined by their attending physician to be suffering from a terminal disease, to request an aid-in-dying drug prescribed for the purpose of ending their life in a humane and dignified manner.

Physician's Orders for Life Sustaining Treatment (POLST) – A physician order form that addresses a patient's wishes about a specific set of medical issues related to end-of-life care. The form must be signed and dated by a physician and pt/representative to be valid.

#### VALID DNR ORDERS/FORMS

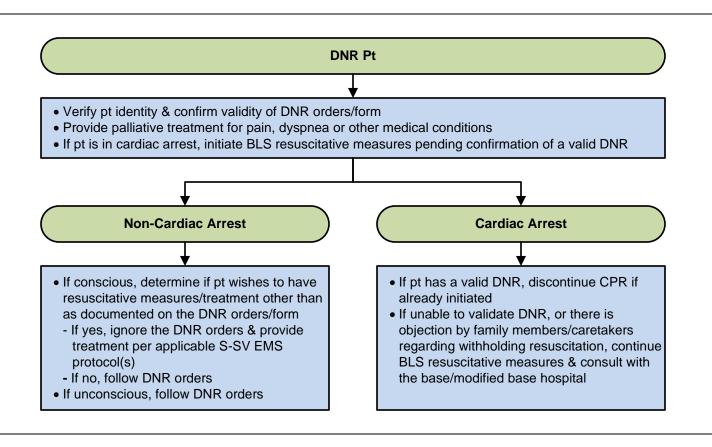
- EMSA/CMA Prehospital DNR form
- POLST form
- DNR wrist or neck medallion
- DNR order in the medical record of a licensed healthcare facility signed by a physician (or an RN verifying a valid verbal physician order on a physician order sheet), or an electronic physician's order
- Verbal DNR order given by the patient's physician
- An AHCD or DPAHC with the agent/attorney-in-fact physically present and stating the pt refuses resuscitative measures

DNR orders do not expire and photocopies/electronic physician's orders are considered valid



## **DNR, POLST & End Of Life Option Act**

- All pts shall receive an immediate assessment/evaluation by EMS personnel.
- A copy of applicable DNR orders/forms shall be attached to the EMS patient care report (PCR) when available.
- If DNR orders/forms are not available, document the method of DNR verification in the PCR.
- If DNR bracelet or neck medallion present, document the medallion number in the PCR.
- If applicable, document the name/contact information of any agent, attorney-in-fact or other pt representative.
- If pt is transported by EMS, DNR orders/forms shall be taken with the pt to the receiving facility.
- Pts with a POLST form indicating "Comfort-Focused Treatment", are typically only transported to a hospital if their comfort needs cannot be met in their current location/setting. These pts who have no signs of pain or respiratory distress, & who have sufficient family/caretaker support present, may be released at scene by EMS personnel & not transported to the hospital, unless transportation is requested by the patient/legal representative.
- EMS personnel shall contact the base/modified base hospital for consultation for any questions or concerns regarding EMS treatment/transport of a patient with a POLST form.
- Provide supportive care to family members/caregivers as appropriate.



#### **End of Life Option Act Pt**

If a terminally ill individual appears to have ingested an Aid-in-Dying drug:

- Provide comfort care (e.g. oxygen, non-invasive airway positioning, suctioning) as indicated
- Determine whether there are DNR orders available, and follow such orders as applicable
- If family objects, consult with base/modified base hospital for consultation
- Do not start resuscitation measures if pt is in cardiac arrest