

**HC**  
 HOLY CROSS HOSPITAL  
**DO NOT RESUSCITATE**  
**PHYSICIAN ORDER FORM**

BEUSTADTEN, ISRAEL 01Y  
 03/10/03 0306800162  
 3127 N. CRISTO...  
 : 1/P 8155  
 1111 UNIV BLVD W.  
 SILVER SPRING  
 301 649-1310 Addressograph

**IMPORTANT**

- \* If Patient is not competent to make his/her own decisions, see administrative policy **"CONSENT TO WITHHOLD OR WITHDRAWAL TREATMENT"**. Completion of other forms is required.
- \* See reverse side for guidelines for completion of this form.

**SECTION I DO NOT RESUSCITATE**

I have discussed the decision to withhold cardiopulmonary resuscitation from Issac Neustadter with Dr. Neustadter (RELATIVE TO PATIENT) PATIENT NAME

On the basis of this discussion or on the basis of an advance directive, if a cardiopulmonary arrest occurs, **NO** resuscitative measures are to be performed.

PHYSICIAN SIGNATURE: John A Ball DATE: 3/16/03 TIME: \_\_\_\_\_

**SECTION II PRE-ARREST ORDERS**

Before cardiopulmonary arrest occurs, the patient is a candidate for the following:

- Intubation
- Lab/Diagnostics
- IV Pressor Therapy
- Defibrillation
- IV Antiarrhythmic Therapy
- Cardioversion
- Other NO CPR
- No to all of the above

PHYSICIAN SIGNATURE: John A Ball DATE: 3/16/03 TIME: 1715

**SECTION III CHANGE - IN - STATUS ORDERS**

1.  **DNR ORDER RESCINDED**

PHYSICIAN SIGNATURE: \_\_\_\_\_

2.  **SEE UPDATED DNR ORDERS**

PHYSICIAN SIGNATURE: \_\_\_\_\_

DNR form, obtained from general counsel on May 24, 2006.

Why wasn't this form included in the patient records?

- Form written on March 16 by weekend on-call doctor without admitting physician's or surrogate's knowledge.
- Form expired on March 17 upon Dr. Ball's final visit.
- Form was in any case void upon patient's transfer out of ICU.
- Form made patient a "candidate for intubation."

Why wasn't patient intubated when intubation was needed?

**DO NOT RESUSCITATE FORM****GUIDELINES FOR COMPLETION OF FORM**

1. The DNR order is discussed with the patient or responsible decision-maker prior to writing the order. (See administrative policy "Consent to Withhold or Withdrawal Treatment")

Discussion includes:

- a. The fundamental understanding of resuscitation therapy.
- b. The appropriate use of this therapy.
- c. Conditions which would include or preclude the patient as a candidate for this therapy.
- d. The physician's recommendation regarding the therapy for this individual patient.

2. Patients or responsible decision-maker, in conjunction with the attending physician, makes the decision regarding the DNR status. If there is a conflict, refer to the policy concerning withholding of treatment.

3. If the decision is to write the DNR order, the procedure is as follows:

- a. The attending physician is responsible for completion of the DNR order form within 24 hours of order. (Forms available at Nursing Unit)

**Section I - DO NOT RESUSCITATE ORDER**

1. Indicate name of patient and other if discussed with other than patient.
2. Sign and indicate date and time.

**Section II - PRE-ARREST ORDERS**

1. Determine and check appropriate treatments for this patient to receive previous to any arrest.
2. Sign and indicate date and time.

**Section III - CHANGE - IN - STATUS ORDERS**

This section is to be used only when the

1. DNR order is rescinded, or
  2. A new DNR order form has been completed.
- b. Once completed, the newly written DNR form is placed IN FRONT of the physician order section of the patient chart by the physician. The unit secretary or RN will transcribe the DNR orders to the patient care profile (PCP) and transfer the DNR form to the front of the chart. The "ACTIVE" DNR form will remain in the front of the chart and is not to be thinned. "INACTIVE" DNR orders are placed in the "MISCELLANEOUS" section of the chart. "INACTIVE" DNR orders will not be thinned from the "MISCELLANEOUS" section.
- c. The DNR order must be reconsidered when the patient is transferred to or from a critical care unit, the operating room or at change of attending physician.