

What You Should Know About Do-Not-Resuscitate (DNR) Laws in Ohio

Ohio's Do-Not-Resuscitate (DNR) Law gives individuals the opportunity to exercise their right to limit care received in emergency situations in special circumstances. "Special circumstances" include care received from emergency personnel when 911 is dialed. The law authorizes a physician, advanced practice registered nurse or physician assistant (authorized health care provider) to write an order letting health care personnel know that a patient does not wish to be resuscitated in the event of a cardiac arrest (no palpable pulse) or respiratory arrest (no spontaneous respirations or the presence of labored breathing).

The following information is included as a brief overview of some of the more common questions, issues and concerns regarding Ohio's Do-Not-Resuscitate law. It is not meant to provide all information needed to make the decision to have a Do-Not-Resuscitate order written. An individual may have a DNR order written after consultation with his or her authorized health care provider regarding end-of-life issues.

The DNR order may be honored in multiple settings, including but not limited to: nursing facilities, residential care facilities, hospitals, outpatient areas, home, and public places. For a DNR order to be useful in multiple settings, it must be recognizable by health care workers. The Ohio Department of Health has developed a standard DNR order form that is the only state authorized form that is fully transportable and recognized throughout Ohio. You may choose to display the form in your residence to be easily visible to healthcare personnel and transport it with you when you are away from home. Other DNR identifications, including a necklace, bracelet or wallet identification card, may be used but must include the Ohio DNR logo and identifying information of the individual to be valid.

Unlike a Living Will and Health Care Power of Attorney, which can be executed without the input of a healthcare professional, a DNR Order must be written and signed by a physician, an advanced-practice registered nurse, or physician assistant after consultation with the patient.

A DNR order on the state approved document is legally-sanctioned and implemented according to Ohio Law. The DNR order is implemented at different points, depending upon the patient's wishes and must be consistent with reasonable medical standards. Care that eases pain and suffering will always be implemented regardless of a DNR order. Other related care will be provided depending on the specific order that your physician prescribes. You should check with your prescriber regarding the right type of DNR order needed when considering your specific medical needs.



DNR/CPR Care: The Facts

Ohio first adopted a law concerning DNR orders in 1998. DNR stands for "do not resuscitate." A person who does not wish to have cardiopulmonary resuscitation (CPR) performed may make this wish known through a DNR order from their authorized healthcare provider. A DNR order assists emergency responders in knowing if an individual does not want CPR if or when their heart stops or if they stop breathing.

If an emergency responder comes upon someone with a DNR Comfort Care order, the emergency responder will provide these comfort measures:

- Conduct an initial assessment
- Perform Basic Medical Care
- Clear airway of obstruction or suction airway
- If necessary for comfort, may administer oxygen, CPAP or BiPAP
- May obtain IV access for hydration or pain medication to relieve discomfort, but not to prolong death
- If possible, may contact other appropriate healthcare providers (hospice, home health, physician, APRN or PA)

The emergency responder will not:

- Perform CPR
- Administer resuscitation medications with the intent of restarting the heart or breathing
- Insert an airway adjunct
- De-fibrillate, cardiovert or initiate pacing
- Initiate continuous cardiac monitoring

CPR can be life-saving but some people may not want it administered in certain cases.

In some cases, CPR saves lives. In many cases, it is not effective. Many people overestimate the success of CPR. A person who is revived may be left with permanent or painful injury. Resuscitation also may include other treatment, such as drugs, tubes and electric shock. People with terminal illnesses or other serious medical conditions may prefer to focus on comfort care at the end of life rather than receiving CPR when the time comes. For more information about the pros and cons of CPR and whether it is right for you, ask your physician.

It is easy to make your wishes about CPR known.

If you want to receive CPR when appropriate, you do not need to do anything. Health care providers are required to perform CPR when necessary. If you do not want CPR, you need to discuss your wishes with your physician and ask your physician to write a DNR Order. If your physician agrees that you should not get CPR, he or she can fill out the required form to make your wishes known in case of an emergency.



There are different DNR orders that you can choose and discuss with your authorized health care provider.

Under Ohio's DNR Law, the Ohio Department of Health has established a standardized DNR order form. When completed by an authorized health care provider (physician, advance practice registered nurse, or physician assistant), these standardized DNR orders allow patients to choose the extent of the treatment they wish to receive or not receive at the end of life. Your authorized health care provider can further explain the differences in DNR orders.

Even if you are healthy now, you may want to state that you do not want to receive CPR if you ever become terminally ill.

Ohio has a standard Living Will Declaration form. This form specifically allows you to direct health care providers not to administer life-sustaining treatments, including CPR, and to issue a DNR Order if two physicians have agreed that you are either terminally ill or permanently unconscious.

DNR Comfort Care does NOT mean "Do Not Treat."

The DNR Comfort Care Protocol is very specific in terms of what treatment is to be given and what treatment is to be withheld. Only those items listed on the "will not" list are to be withheld. The items listed on the "will" list, along with any other treatment that may be needed for the patient's condition, may be provided as appropriate.

DNR Orders may be revoked.

You always have the right to change your mind and request CPR. If you do change your mind, you should speak with your authorized health care provider right away about revoking your DNR Order. You also should tell your family and caregivers about your decision and throw away any DNR identification items you might have.

If you have a DNR Order or identification, your family cannot demand that CPR be provided.

You have the right to make your own decisions about your health care. You should make sure your family knows your desires about CPR. In certain medical situations, your physician and agent may make decisions regarding your care based upon new medical information. This could include decisions related to CPR. You should make sure these individuals know your desires about CPR.

Since a DNR is a medical order, you need a physician to write and sign it for you.

Unlike Living Wills and Health Care Powers of Attorney, DNR Orders must be written and signed by a physician, advanced practice registered nurse or physician assistant after consultation with the patient.

Copies of these forms should be kept in easily accessible places where others can find them.

You also should give copies of your Living Will, Health Care Power of Attorney and/or DNR Order to your authorized health care provider, family members and any close friends who might serve as caretakers. At home, a DNR order should be displayed prominently either on the refrigerator or elsewhere so that an emergency responder will see it.

