

**CHECK LIST FOR DO NOT ATTEMPT
CARDIOPULMONARY RESUSCITATION - DNACPR**

WHEN YOU RECEIVE SOMEONE INTO YOUR CARE IT IS YOUR RESPONSIBILITY TO CHECK THE DNACPR STATUS. THIS INCLUDES ENSURING THAT THEY HAVE A VALID FORM THAT HAS BEEN COMPLETED

Patient details must be legible and complete – a printed sticker is acceptable
Date of DNACPR order must be completed. A document without this is not valid

REASON

Diagnosis why medically futile: must be clear. It must clearly state END STAGE and list all co-morbidity.

Never accept if states: dementia, frailty or learning disability.

Good examples: dementia with co-morbidities End stage heart failure and COPD.

Why CPR would not be acceptable: should state something like prolonging suffering.

Patient does not want CPR: it must state the date of conversation and who was present.

RECORD OF DISCUSSION

All boxes must be ticked or crossed to indicate yes or no.

There must be a record of the discussion, which includes time, date and who was present at the conversation. This should also be recorded in medical notes. If a discussion has not been had then it is essential that it is recorded the reason why this did not happen.

HEALTH PROFESSIONALS COMPLETING THE FORM

The person who has written on the form and had the discussions should sign here as a record that it has happened. If it is the same person who is authorised to sign the form it should still be completed. Some ambulance crews may not accept it not completed

**REVIEW AND ENDORSEMENT BY RESPONSIBLE
SENIOR CLINICIAN**

This should always be completed with a signature, date and the position of the senior clinician.

Is DNACPR decision indefinite **Yes or No must be ticked or crossed**

If No is marked it must state a review date. It is not valid without the review date for an indefinite decision and if the review date has passed it is not valid.