

# OBTAINING AND RENEWING DNR/DNI ORDERS

## POLICY

DNR/DNI orders will be obtained from the client's primary physician/allowed non-physician practitioner (NPP) according to client wishes and applicable laws and regulations. Orders will be renewed with each subsequent plan of care.

## PURPOSE

To outline the process for obtaining and renewing DNR/DNI orders from the client's physician/allowed non-physician practitioner (NPP) consistent with applicable laws and regulations.

## SPECIAL INSTRUCTIONS

1. Resuscitation status will be assessed and documented upon initial assessment.
2. Verification of DNR/DNI status will be obtained from the client's primary physician/allowed non-physician practitioner (NPP).
3. DNR/DNI orders will be included on Plan of Care and the order will be renewed with each subsequent Plan of Care. The presence of an advance directive will be identified, and the Agency will obtain a copy if client consents.
4. Resuscitation status will be clearly documented on the emergency plan and made available to all caregivers. Caregivers will also be aware of any specific requests client has identified in an advance directive.
5. Copies of DNR/DNI orders will be available in a predetermined location in the client's home.
6. In the event of Cardiopulmonary Arrest, agency staff will follow physician's/allowed non-physician practitioner's (NPP) orders and client's advance directives and care plan.
7. If DNR orders are not present, staff will initiate CPR, call 911, and notify Agency Supervisor.

## POLST (PHYSICIAN ORDERS FOR LIFE SUSTAINING TREATMENT)

This is a more detailed and specific and detailed “Do not resuscitate” order. It is filled out with your provider and is based on the client end of life decisions. Once it is signed, physicians, NPPs, emergency medical professionals and other health care professionals MUST honor the instructions on a client’s POLST form.

Depending on your state, a POLST may go by one of the following names:

**MOST:** (Medical Orders for Scope of Treatment)

**MOLST:** Medical Orders for Life Sustaining Treatment)

**POST:** Physician Orders for Scope of Treatment)

**TPOPP:** Transportable Physician Orders for Patient Preferences)

The forms differ in name and structure depending on where you live, but are conceptually the same across all states. The POLST form contains 3 or 4 sections that address a different aspect of end of life medical care.

### **POLST vs ADVANCE DIRECTIVE (Living Will)**

There are many similarities, but a POLST form is signed by your physician and is a medical order—a Living will is not. Any emergency medical personnel and non-emergency medical professionals are legally obligated to follow the instructions on the POLST

POLST forms address current specific medical situation and how the client wants to be cared for given their current condition and situation.

A POLST form is “portable”, and moves with the client between facilities, hospitals etc. as a part of the medical record. The decisions spelled out in the POLST form will be honored.

By law emergency medical professionals and EMTs are required to carry out certain life-sustaining treatments such as CPR if heart or breathing stops- UNLESS there is a POLST.

The original POLST form always remains with the client regardless of where they are.

In the home the POLST form should be stored where emergency medical personnel can easily see it such as on the refrigerator, by the bed or by the front door.

Make sure the Health Care Proxy and the physician have a copy of the form.

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