

Resuscitation Review Tool: Part A

Question	YES	NO	DON'T KNOW	Comments
<p>1. Does your organization have a Do Not Resuscitate (DNR) policy?</p> <p><i>If yes, provide details.</i></p>				
<p>2. Does your organization require a physician's order for DNR?</p>				
<p>3. Does your organization use the definition of cardiopulmonary resuscitation (CPR) as specified by the <i>Ministry of Health and Long-Term Care</i>?</p> <p><i>If no, provide your organization's definition.</i></p>				
<p>4. As a nurse¹, do you use your professional judgment to determine whether you need to discuss a client's resuscitation wishes with him/her?</p> <p><i>If yes, describe.</i></p>				
<p>5. If you are unable to communicate with a client, who is in emergency arrest, and you do not have a documented CPR status/advance directive, nor do you have a power of attorney or substitute decision-maker present, would you initiate basic CPR?</p>				

6. Are you obligated to offer/initiate CPR at the request of the client/family/substitute decision-maker if the physician has determined it will be of no benefit and is not part of the treatment plan?				
7. Is there a legal definition of pronouncing death?				
8. Can nurses pronounce death in your practice setting if the death is expected? <i>Please circle your area of practice.</i>				Acute Care Community LTC Other: _____
9. Can a medical certificate of death be completed prior to a client's death?				
10. Does your organization require a physician's order for a nurse to pronounce an expected death?				
11. Do your clients' charts/files include a clearly identified plan of treatment as defined by the <i>Health Care Consent Act, 1996</i> ² ?				
12. Can you define the terms <i>power of attorney for personal care</i> and <i>substitute decision-maker</i> ? <i>If yes, provide examples.</i>				
13. Can you define the term <i>advance directive</i> ? <i>If yes, provide an example.</i>				

<p>14. Does your organization have a process to follow if nurses disagree with a physician's plan of treatment?</p> <p><i>If yes, briefly outline the steps you take.</i></p>				
<p>15. Is there a consistent place in the client's chart to document resuscitation-related discussions?</p> <p><i>If yes, state where.</i></p>				
<p>16. If a client presented to your organization with a Do Not Resuscitate Confirmation (DNRC) form, would your organization accept that a treatment plan exists in which a decision about DNR has been made?</p>				
<p>17. Are you confident you can determine whether clients are capable of making treatment decisions?</p>				

References:

1. In this document, *nurse* refers to a Registered Practical Nurse (RPN), Registered Nurse (RN) or Registered Nurse in the Extended Class [RN(EC)], also known as Nurse Practitioner (NP).
2. *Health Care Consent Act, 1996*, S.O. 1996, c. 2, s.13