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|  <b>County of San Diego</b><br><b>EMS</b><br>A Division of San Diego County Fire | MEDICAL CONTROL  |  | <b>S-414</b> |
|   | <b>DO NOT RESUSCITATE-DNR/END OF LIFE OPTION</b><br><b>(AID-IN-DYING DRUG)</b> |  |              |
|   | Date: 7/1/2019   |  | Page 1 of 4  |

## I. PURPOSE

To establish guidelines for all levels of Emergency Medical Technicians (EMTs), in San Diego County, to determine appropriateness of either:

- A. Withholding or discontinuing resuscitative measures; **OR**
- B. Obtaining a Base Hospital Physician Order for pronouncement of patients in cardiac arrest while in the prehospital setting.
- C. To honor the wishes of a qualified patient who has obtained and self-administered an aid-in-dying drug as applied to the End of Life Option Act.

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- II. **AUTHORITY:** California Health and Safety Code, Division 1, Part 1.85 (End of Life Options Act), Sections 442-443 and Division 2.5, Sections 1797.220 and 1798; California Probate Code, Division 4.5, Sections 4000-4026; and California Probate Code, Division 4.7 (Health Care Decision Law).
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## III. DEFINITION(S)

**Absent Vital Signs:** Absence of respirations and absence of a carotid pulse.

**Advance Health Care Directive:** An individual health care instruction or a power of attorney for health care executed pursuant to the Health Care Decisions Law

**Aid-in-Dying Drug:** A drug determined and prescribed by a physician for a qualified individual, which the qualified individual may choose to self-administer to bring about his or her death. The prescribed drug may take effect within minutes to several days after self-administration.

**“Attorney-in-fact”, or Health Care Agent:** A person granted authority to act for the patient as governed by the Health Care Decisions Law pursuant to Section 4670 of the California Probate Code.

**Comfort Measures:** Medical intervention used to provide and promote patient comfort.

**Do Not Resuscitate (DNR):** Order applied to a patient in cardiopulmonary arrest who does not wish to receive chest compressions, defibrillation, assisted ventilation, endotracheal intubation, and/or cardiotoxic drugs. The patient is to receive full treatment other than resuscitative measures (e.g., for airway obstruction, pain, dyspnea, major hemorrhage).

**DNR Form:** Any completed “Do Not Resuscitate” form.

**DNR Medallion:** A medallion or bracelet with permanently imprinted insignia that is worn by a patient and that has been manufactured and distributed by an organization approved by the California Emergency Medical Services Authority imprinted with the words “Do Not Resuscitate, EMS”.

**End of Life Option Act:** The California state law authorizing an adult, eighteen years or older, who meets certain qualifications and who has been determined by his or her attending physician to be suffering from a terminal disease to make a request for an “aid-in-dying drug” prescribed for the purpose of ending his or her life.

**Final Attestation:** A written document completed by the patient prior to ingesting the aid-in-dying drug.

**Physician Orders for Life-Sustaining Treatment (POLST) Form:** A signed, physician order that clarifies a patient’s resuscitation wishes and desired interventions related to end-of-life care. May be used for both adult and pediatric patients.

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## **IV. PROCEDURES**

**A.** All patients with absent vital signs who are not “obviously dead” or are adults suffering from a blunt traumatic arrest (refer to County of San Diego, Emergency Medical Services (CoSD EMS) Policy S-402 “Prehospital Determination of Death”) shall be treated with resuscitative measures unless the following circumstances apply:

An EMT may withhold or discontinue Cardiopulmonary Resuscitation (CPR) if presented with one of the following:

1. DNR Medallion.
2. A completed DNR Form stating “Do Not Resuscitate”, “No Code”, or “No CPR”.
3. A written and signed order in the patient’s medical record (electronic medical record is permissible).
4. An Advance Health Care Directive specifying “Do Not Resuscitate”.
5. A Base Hospital Physician Order.
6. A DNR request communicated by a patient’s “Attorney-in-fact” or health care agent.

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7. A completed POLST form specifying “Do not attempt resuscitation/DNR” in Section A, Cardiopulmonary Resuscitation.
8. A “Final Attestation for an Aid-in-Dying Drug to End My Life in a Humane and Dignified Manner”. However, there is no mandate for the patient to maintain the final attestation in close proximity to the patient. If a copy of the final attestation is available, EMS personnel should confirm the patient is the person named in the final attestation. EMS personnel should make a good faith effort to review and verify: Patient’s name, signature, and dated document identified as “Final Attestation For An Aid-in-Dying Drug to End My Life in a Humane and Dignified Manner”
9. The following guidelines are provided for EMS personnel when responding to a patient who has self- administered an aid-in-dying drug.
  - a. All patients require an immediate medical evaluation and should be provided comfort measures (e.g., airway positioning, suctioning).
  - b. Withhold resuscitative measures if patient is in cardiopulmonary arrest. If a POLST or Advanced Health Care Directive is present, follow the directive as appropriate for the clinical situation.
  - c. The patient may at any time withdraw or rescind his or her request for an aid-in-dying drug regardless of the patient’s mental state. In this instance, EMS personnel shall provide medical care as per standing protocols and contact the base hospital.
  - d. Family members may be at the scene of a patient who has self- administered an aid-in-dying drug. If there is objection to the End of Life Option act, inform the family that comfort measures (e.g., airway positioning, suction) will be provided and consider base hospital contact for further direction.
  - e. Obtain a copy of the final attestation and attach it with the EMS report form when possible.

**B. Documentation**

The reason for withholding or terminating CPR shall be documented in the patient care record. DNR orders shall include the name of the physician or designee (e.g., Physician Assistant, Nurse Practitioner) and the date of the order. If patient transport is initiated, the DNR Form (original or copy), DNR Medallion, or a copy of the valid DNR Order from the patient’s medical record shall accompany the patient. If no printed copy is available, note the physician’s name and presence of signature.

**C. Considerations**

1. In the event any patient expires in an ambulance, either before or during transport, the following should be considered:
  - a. Unless specifically requested, the patient should not be returned to a private residence or skilled nursing facility. Continue to the destination hospital or hospice.

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- b. If between hospitals, return to the originating hospital, if time is not excessive. If transport time would be excessive, divert to the closest hospital with a basic emergency facility (BEF).
    - c. In rural areas, in cases where the Medical Examiner has not waived the case, the transporting agency and the Medical Examiner shall arrange for a mutually acceptable rendezvous location where the patient may be transported and transferred to the custody of law enforcement so that the transporting unit may return to service.
  - 2. Severity of illness of the patient should not affect destination.
- D.** For any concerns regarding resuscitation, prehospital staff should contact their assigned Base Hospital.