

WACOSA

POLICY ON PREPARING AND RESPONDING TO “DO NOT RESUSCITATE/DO NOT INTUBATE ORDERS”

WACOSA believes that life is precious and it is our responsibility to do all we can to protect and preserve the lives of individuals we serve. However, there are instances when individuals or their guardians may properly ask care providers to not go to extraordinary lengths through medical means to prolong an individual's life.

These instances can include, but are not limited to, situations where it has been determined the individual's health has deteriorated to such an extent that their ability to function is severely diminished or may include situations where the individuals are in great physical pain. WACOSA affirms that individuals or their legal guardians may make a formal request through a Physician's Order called a "Do Not Resuscitate Order" which is often accompanied by a supplemental "Do Not Intubate Order (DNR/DNI)." DNR/DNI Orders demand when a medical emergency arises that would normally require the use of an AED (Automated External Defibrillator), CPR, or intubation, care providers not use these to attempt to resuscitate the individual (these orders will be referred to collectively in this policy and procedure as "DNR/DNI Orders").

It is the position of WACOSA that WACOSA honor the intended wishes of individuals and/or the wishes of parents or guardians acting on behalf of such individuals. We cannot in good conscience respond during an emergency situation in a fashion that is contrary to a clearly-expressed decision made with reverent deliberation by parents, family members and guardians who are most qualified and know the wishes of the individual in question. It is also the policy of WACOSA that our services will not be conditioned on the presence or absence of a DNR/DNI Order.

For a DNR/DNI Order to be honored, WACOSA requires the following:

1. The DNR/DNI Order is expressed by completion and execution of the Minnesota Medical Association EMERGENCY RESUSCITATION GUIDELINES form signed by the individual or, if under guardianship, the individual's legal guardian; by the individual's physician or qualified Nurse Practitioner; and by a witness. *In the absence of the Minnesota Medical Association EMERGENCY RESUSCITATION GUIDELINES form, WACOSA will accept the completed and fully executed Provider Orders for Life-Sustaining Treatment (POLST) signed by the Patient or Legal Guardian; the signature of the Physician/APRN/PA; and dated.* Formats other than the one authorized by the Minnesota Medical Association may be honored, subject to approval by WACOSA management. For all formats used, information must be legible and complete. This form is valid for one year following the date the final signature was obtained. WACOSA must review the form for legibility and execution before the form will be honored.
2. WACOSA personnel are not authorized to sign as a witness or to act as an agent of WACOSA on any DNR/DNI form for any WACOSA participant.
3. All DNR/DNI Orders must be reviewed annually for accuracy and relevancy and updated or affirmed as appropriate.
4. Any variation from this Policy will result in the implementation of full life-saving measures for individuals served, within the capabilities and responsibilities of WACOSA staff.

The Board of Directors of WACOSA approved this Policy revision on November 18, 2024.

Specific procedures for preparing and responding to DNR/DNI Orders are outlined in the WACOSA document “Agency Guidelines in Preparing and Responding to Medical Emergencies for Individuals Having DNR/DNI Orders.”

Nancy Betts, Executive Director Date

Sandie Westergren, Board President Date

WACOSA reserves the right to amend, modify, remove, suspend, terminate, or change this policy in whole or in part at any time with or without notice.