



Resuscitation Treatment Plan

PeaceHealth St. John Medical Center respects the individual's right to make choices regarding life-prolonging treatments including, but not limited to: cardio-pulmonary resuscitation, ventilatory support, antibiotics, dialysis and artificial nutrition and hydration. In keeping with PeaceHealth's mission and values and recognizing patients' right to self-determination, decisions regarding resuscitative care shall be made by competent adult patients or their legally designated decision makers in collaboration with patients' healthcare providers.

Until discussion and decision to withhold resuscitative care is made, resuscitation, according to accepted standards, is attempted.

The admitting physician for each patient admitted to the medical center will discuss the patient's resuscitation wishes with the patient or their legally designated decision maker and document the discussion in the patient's medical chart. If the patient has an advance directive or POLST on file, it is the responsibility of the admitting physician to review that information with the patient and/or the patient's legally designated decision maker for verification.

The Physician Orders for Life Sustaining Treatment (POLST) is a recognized code status order form. The physician reviews the resuscitation wishes of the patient or patient's legally designated decision maker noted in the POLST orders in the case of any changes to the patient's status since the completion of the POLST.

All patients at risk of cardiac or respiratory failure or who, secondary to their physiologic status, may reasonably be expected to die within the next six to twelve months, are encouraged by their healthcare providers to express their preferences regarding cardiopulmonary resuscitation (CPR) and other life-prolonging interventions. These discussions include a description of the procedures encompassed by CPR, ventilatory support, artificial nutrition and hydration and the use of antibiotics as a life-sustaining procedure. When possible, these discussions occur in an outpatient setting between the patient and the patient's primary care physician when general treatment preferences are discussed. The patient's wishes with regard to CPR is documented on the POLST form; a copy is to be placed in the patient's chart and a copy given to the patient or patient's legally designated decision maker.