

Do-Not-Resuscitate (DNR) Orders

Advance Care Planning

Sometimes treatment cannot control cancer. For some patients, the side effects of treatment or multiple organ failure causes a poor quality of life. Our goal is to help patients make decisions about their quality of life and the care they receive. We encourage all patients and caregivers to learn about care options related to the end of life.

We want you to be well informed and have the opportunity to talk about your wishes, questions and concerns with your loved ones and health care team. We value and respect your decisions.

It can be hard to talk about end of life issues. The following information may help you:

- Think about your wishes and preferences
- Understand your options
- Make health care and treatment decisions

Terms to Know

Quality of Life

This is a person's overall well-being. Your idea of a good quality of life may depend on your thoughts, feelings, values and goals. Factors that may affect quality of life include:

- Treatments and their side effects
- How well symptoms are controlled
- Time spent with loved ones at home or in the hospital
- Ability to engage in activities
- Social and spiritual factors

Cardiopulmonary Resuscitation (CPR)

Doctors and nurses do CPR when the heart stops working or when the heart and lungs stop working. They will:

- Push on the chest bone to pump on the heart in an effort to restart the heart.
- Apply a breathing bag and mask to force air into the lungs.

Resuscitation Status

A patient's resuscitation status tells the care team if the patient wishes to receive medical treatment to restart the heart or the heart and lungs, if they stop working.

Breathing Machine (Ventilator)

If a patient cannot breathe on their own, a machine may help give them oxygen. The machine is called a ventilator. With a ventilator, a tube is placed through the patient's mouth into the airway. The machine then breathes for the patient. Some patients on ventilators may be heavily sedated, as if they are in a deep sleep.

Do-Not-Resuscitate (DNR) Orders

Do-not-resuscitate (DNR) orders tell the health care team not to perform CPR.

A DNR order only addresses the use of CPR. If a health care provider feels that chemotherapy or another form of medical care may help, the patient may receive that treatment. You will always receive care focused on keeping you comfortable.

There are 2 types of DNR orders: In-Hospital DNR and Out-of-Hospital DNR.

In-Hospital DNR

The doctor writes this order when the patient is admitted to the hospital. It lasts until a doctor cancels the order or the patient is discharged from the hospital. A new In-Hospital DNR must be written each time the patient is admitted to the hospital.

Out-of-Hospital DNR

This is a medical order that tells a health care team not to perform CPR if your heart or lungs stop working when you are outside the hospital. This is an order signed by a doctor. It is permanent unless the patient cancels the order.

If you do not have an Out-of-Hospital DNR order and your heart or lungs stop working properly, health care providers may do everything medically possible to restart your heart and help you breathe. Emergency personnel perform CPR unless an Out-of-Hospital DNR order is in effect.



To show you have an Out-of-Hospital DNR order, you must have a copy of the DNR order, DNR bracelet or DNR necklace with you at all times.

Be sure to give a copy of your Out-of-Hospital DNR to your medical care team.

Each state has different DNR forms and laws. If your home is in another state, you may want to ask your primary care provider about DNR orders in your home state. Your social work counselor can also help you find answers about DNR orders outside of Texas.

Talk with your doctor or social work counselor to obtain an Out-of-Hospital DNR order.

Patients with an Out-of-Hospital DNR order still need an In-Hospital DNR order if they are admitted to the hospital.

Your Treatment Decisions

The decision to have a DNR order depends on how likely CPR is to bring a patient back to life and on the patient's values and goals. The success of CPR can depend on the person's overall health before the heart or lungs stop working. Advanced cancer and other health conditions can affect the success of CPR.

Sometimes even when CPR is successful at restarting the heart or lungs, the patient's condition can get worse. For example, the patient could:

- Have permanent injuries, such as brain damage, due to lack of blood flow and oxygen to the brain.
- Have damage to other organs, such as the kidneys.
- Need to be on a ventilator for the rest of their life.
- Be in a coma.

We encourage everyone to have conversations about DNR orders and review their decisions from time to time. You may change your decision as often as needed. Talk with the people who you trust and care about you. Having these conversations can prevent disagreement and confusion in the future.

Other Documents to Record Your Medical Wishes

If you become unable to speak for yourself, it is important that your loved ones are able to honor your wishes. You can record your wishes about treatment and who you would like to make decisions for you by completing Medical Power of Attorney and Living Will documents.

Medical Power of Attorney

This document names someone to make decisions for you if you are unable to speak for yourself. In the event that you cannot make decisions for yourself, this person will be able to make decisions for you.

Choose someone who will honor, respect and follow your wishes. Discuss your goals, values and wishes with the person before you complete and sign any forms. Make sure you tell them if any of your wishes change.

Legal Next of Kin

If you do not choose a medical power of attorney, most U.S. states will designate someone based on a list of people who qualify as your next of kin. Each state has different laws about medical power of attorney.

When you are in Texas receiving care, Texas laws apply to you. Your social worker can help you find information about legal next of kin in other states, if needed.

In the State of Texas, the following people can qualify as your next of kin, in order of priority:

1. Your spouse (even if you are separated)
2. Your adult child (if your other adult children agree to this person being the decision-maker)
3. A majority of your reasonably available adult children
4. Your parents
5. A person you have clearly identified to make decisions for you, your nearest living relative or a member of the clergy

If no other person is available, 2 doctors may place a DNR order if they believe that CPR would not help the patient.



This legal next of kin order may not be in line with your wishes, so it is important to complete your Medical Power of Attorney document.

(Medical) Living Will

DNR orders only address resuscitation status. They do not address your wishes about other aspects of care. To record your wishes about other medical decisions, you may use a medical living will.

A medical living will is an outline of the patient's preferences and includes several health conditions. Unlike a DNR, a Living Will is not a doctor's order.

A medical living will may address topics like:

- Artificial nutrition and hydration
- Dialysis (a process to clean the blood when the kidneys are not working)
- The use of a ventilator for breathing
- Comfort care

Additional Resources

For more information about advance care planning and recording your medical wishes, ask your social work counselor for a copy of the Patient Education workbook, **Advance Care Planning**.

Learn more about advance care planning online at www.mdanderson.org/advancecareplanning.

The advance care planning video series is also available online:

- **Advance Care Planning: Conversations Worth Having!**
<http://bit.ly/TalkACP>
- **Part 1: What is Advance Care Planning?**
<http://bit.ly/MDAACP1>
- **Part 2: Quality of Life**
<http://bit.ly/MDAACP2>
- **Part 3: Involving Loved Ones**
<http://bit.ly/MDAACP3>
- **Part 4: Choosing a Patient Representative**
<http://bit.ly/MDAACP4>
- **Part 5: Advance Directives**
<http://bit.ly/MDAACP5>
- **Legacy: Making Memories Last**
<http://bit.ly/MDALegacy>

If you have questions, talk to your social work counselor or call Social Work at 713-792-6195.