

UNDERSTANDING ATTEMPTED RESUSCITATION

An informational brochure to help you decide if resuscitation is a treatment that you would want.

Emergencies happen. At St. Thomas Elgin General Hospital (STEGH), we want to provide you with the level of care YOU want when emergencies occur. In order to do this, we need to be aware of your wishes, should your heart stop beating.

Conversations about this topic can be difficult and upsetting for you, your family and your friends. We hope this brochure will help when considering your wishes about attempted resuscitation.

WHAT IS ATTEMPTED RESUSCITATION?

Resuscitation involves aggressive medical procedures, which may not be right for everyone.

This includes a number of medical procedures used to try to restart a heart that has stopped beating or when lungs have unexpectedly stopped working. CPR procedures can range from mouth to mouth breathing and pumping on a person's chest, to electric shocks that attempt to restart the heart and machines that breathe for an individual.

HOW SUCCESSFUL IS ATTEMPTED RESUSCITATION?

In most cases, attempted resuscitation when the heart has stopped beating is not as successful as seen on television and in the movies. Many factors make resuscitation more or less likely to be successful. Ask your doctor how your age and medical condition may affect the outcome of attempted resuscitation.

WHAT HAPPENS WHEN RESUSCITATION IS SUCCESSFUL?

If your heart stops beating and we are able to restart it, you may be hooked up to a machine for several days or weeks in the Intensive Care Unit. Brain damage can occur, depending on how long you stopped breathing. Other complications include broken ribs from pumping on the chest, weak lungs, etc.

WHAT ARE MY OPTIONS REGARDING ATTEMPTED RESUSCITATION?

At STEGH, there are five levels of attempted resuscitation that your doctor will discuss with you. If you have questions or don't understand something, ask your doctor to clarify. You can change your mind, and you do not have to make a decision right away. *(See chart over page.)*



WHAT IF I DO NOT WANT YOU TO ATTEMPT RESUSCITATION?

- This is known as allowing a natural death.
- You have the right to refuse any treatment option available to you, including attempted resuscitation.
- It is ok if attempted resuscitation is not the right decision for you. It is your health care team's goal to respect your wishes, and to provide you with the right care at the right time.
- You will continue to receive all other appropriate treatments, such as pain control, antibiotics etc., unless you state otherwise.

CAN I CHANGE MY MIND?

Yes. You can always change your mind.

You have the right to know the risks, benefits, and likely results of all treatment options.

You also have the right to refuse or withdraw consent for treatment at any time, including lifesaving or life prolonging treatment.

If at any time you change your decision, let a member of the health care team know. We will ensure it is documented.

Developed in collaboration with patient and family partners.



OPTIONS:

	CPR	Electric Shocks (Defibrillation)	Tube in throat to breathe for you (Mechanical Ventilation)	Heart Monitor	Mask to push oxygen into your nose/ lungs (CPAP)	Intravenous fluids, antibiotics, oxygen, suctioning
Do everything to try to restart my heart and/or breathing.	X	X	X	X	X	X
Do not assist me to breathe or shock my heart, but use other treatments to manage reversible problems (such as antibiotics for an infection). If my heart stops beating and/or I am not breathing, allow my natural death to occur.				X		X
Assist me to breathe but do not put a tube down my throat or shock my heart. If my heart is not beating and/or I am not breathing, allow my natural death to occur.				X	X	X
Breathe for me with a tube down my throat, but do not shock my heart. If my heart is not beating and/or I am not breathing, allow my natural death to occur.			X	X	X	X
Keep me comfortable. If my heart is not beating and/or I am not breathing, allow my natural death to occur.						X

WHEN DO I NEED TO DECIDE?

- We ask all patients on admission about their wishes. There is time to ask for more information if you need it.
- When you tell us your wishes, those wishes will help guide your care. If you are unable to speak, your wishes will be respected.
- If an emergency occurs before you have made a decision, the hospital team will follow usual procedure to attempt resuscitation.

WHAT WILL MY HEALTH CARE TEAM DO?

- Listen to you to ensure you understand your options, and answer your questions.

WHO SHOULD I TALK TO ABOUT THIS IMPORTANT DECISION?

You may wish to talk to those who are supportive to you, such as family, friends, or your doctor.

If you become very sick, you may not be able to make decisions for yourself. If that happens, your substitute decision maker (SDM) will step in to make decisions about medical care on your behalf. It is important to let your SDM know what your wishes are so they can advocate for you.