

REGULATIONS GOVERNING DURABLE  
DO NOT RESUSCITATE ORDERSPART I.DEFINITIONS**12VAC5-65-10. Definitions.**

The following words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise:

"Agent" means an adult appointed by ~~a competent adult patient~~ the declarant under an advance directive, executed or made in accordance with the provisions of §54.1-2983 of ~~the Code of Virginia~~, to make health care decisions for him. The declarant may also appoint an adult to make, after the declarant's death, an anatomical gift of all or any part of his body pursuant to Article 2 (§32.1-289 et seq.) of Chapter 8 of Title 32.1.

~~"Attending physician" means the primary physician who has responsibility for the treatment and care of the patient.~~

~~"Authorized decision maker" means, in order of priority, designated agent, guardian or committee, spouse, adult child, parent, adult brother or sister, other relative in descending order of blood relationship; provided, however, that when two or more persons in the same class with equal decision-making priority are in disagreement, a majority authorization shall be controlling.~~

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"Board" means the State Board of Health.

"Cardiac arrest" means the cessation of a functional heartbeat.

"Cardiopulmonary resuscitation" means medical procedures including cardiac compression, endotracheal intubation and other advanced airway management, artificial ventilation, and defibrillation, ~~administration of cardiac resuscitation medications and~~ related procedures.

"Commissioner" means the State Health Commissioner.

"Durable Do Not Resuscitate Order or Durable DNR Order" means ~~an order written by the attending physician directing that a particular patient not be resuscitated, with such order including the patient's full legal name, the physician's signature, and the date issued.~~ a written physician's order issued pursuant to §54.1-2987.1 in a form authorized by the Board to withhold cardiopulmonary resuscitation from an individual in the event of cardiac or respiratory arrest. For purposes of this chapter, cardiopulmonary resuscitation shall include cardiac compression, endotracheal intubation and other advanced airway management, artificial ventilation, and defibrillation and related procedures. As the terms "advance directive" and "Durable Do Not Resuscitate Order" are used in this article, a Durable Do Not Resuscitate Order is not and shall not be construed as an advance directive. When used in these regulations, the term "Durable

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DNR Order" shall include any authorized alternate form of identification issued in conjunction with an original Durable DNR Order form.

"Emergency Medical Services or EMS " ("EMS") means the services utilized in responding to the perceived individual needs for immediate medical care in order to prevent loss of life, aggravation of physiological or psychological illness or injury including any or all services which could be described as first response, basic life support, advanced life support, specialized life support, patient transportation, medical control, and rescue. rendered by an agency licensed by the Virginia Office of Emergency Medical Services, an equivalent agency licensed by another state or a similar agency of the federal government when operating within this Commonwealth.

"Emergency Medical Services Agency or EMS Agency " ("EMS agency") means any person, firm, corporation, or organization licensed by the board, which is properly engaged in the business, service, or regular activity of providing emergency medical care to persons who are sick, injured, wounded or otherwise incapacitated or helpless. as defined herein, licensed to engage in the business, service, or regular activity, whether or not for profit, of transporting and/or rendering immediate medical care to such persons who are sick, injured, wounded or otherwise incapacitated or helpless.

"Emergency Medical Services Do Not Resuscitate Order" ("EMS/DNR Order") means a written physician's order in a form approved by the board which authorizes qualified emergency medical services personnel and hospital emergency department health care

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~~providers to withhold or withdraw cardiopulmonary resuscitation from a particular patient in the event of cardiac or respiratory arrest.~~

~~"Emergency medical services personnel" ("EMS personnel") means persons responsible for the direct provision of emergency medical services in a given medical emergency including any or all persons who could be described as a first responder, attendant, attendant-in-charge, or operator.~~

~~"Qualified Emergency Medical Services Personnel" means EMS personnel who are authorized to follow EMS/DNR Orders. This term shall include any person (i) holding current certification to provide emergency medical patient care or treatment by the Department of Health, including those certified as EMS First Responders, Emergency Medical Technicians (EMT), EMT-Shock/Trauma, EMT-Cardiac, and EMT-Paramedic and (ii) acting in accordance with EMS/DNR Order Implementation Protocols.~~

~~"Hospital emergency department health care provider" means a licensed physician or a registered nurse working in a hospital emergency department.~~

"Incapable of making an informed decision" means the inability of an adult patient, because of mental illness, mental retardation, or any other mental or physical disorder which precludes communication or impairs judgment and which has been diagnosed and certified in writing by his physician with whom he has a bona fide physician/patient relationship and a second physician or licensed clinical psychologist after personal

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examination of such patient, to make an informed decision about providing, withholding or withdrawing a specific medical treatment or course of treatment because he is unable to understand the nature, extent or probable consequences of the proposed medical decision, or to make a rational evaluation of the risks and benefits of alternatives to that decision. For purposes of this article, persons who are deaf, dysphasic or have other communication disorders, who are otherwise mentally competent and able to communicate by means other than speech shall not be considered incapable of making an informed decision.

"Persistent vegetative state" means a condition caused by injury, disease or illness in which a patient has suffered a loss of consciousness, with no behavioral evidence of self-awareness or awareness of surroundings in a learned manner, other than reflex activity of muscles and nerves for low level conditioned response, and from which, to a reasonable degree of medical probability, there can be no recovery.

"Person Authorized to Consent on the Patient's Behalf" means any person authorized by law to consent on behalf of the patient incapable of making an informed decision or, in the case of a minor child, the parent or parents having custody of the child or the child's legal guardian or as otherwise provided by law.

"Physician" means a person licensed to practice medicine in the Commonwealth of Virginia or in the jurisdiction where the treatment is to be rendered or withheld.

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"Qualified emergency medical services personnel," means personnel as defined by §32.1-111.1 when acting within the scope of their certification.

"Qualified Health Care Personnel" means any licensed person functioning in any facility, program or organization operated or licensed by the State Board of Health, or by the Department of Mental Health, Mental Retardation and Substance Abuse Services or operated, licensed or owned by another state agency. For the purposes of these regulations, this definition shall include any qualified emergency medical services personnel.

"Respiratory arrest" means cessation of breathing.

"Terminal condition" means a condition caused by injury, disease or illness from which, to a reasonable degree of medical probability, a patient cannot recover and (i) the patient's death is imminent or (ii) the patient is in a persistent vegetative state, ~~as defined in §54.1-2982 of the Code of Virginia.~~

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~~The board has promulgated these regulations in order to ensure appropriate implementation and application of the EMS/DNR Order statute.~~

Section 54.1-2987.1 of the Code of Virginia (1950), as amended, vests authority for the regulation of Durable DNR Orders in the State Board of Health and directs the Board to prescribe by regulation the procedures, including the requirements for forms and any alternate forms, to authorize qualified health care personnel to follow Durable DNR Orders. All EMS DNR Orders issued or in effect between July 1, 1999, and the effective date of this regulation are to be considered Durable DNR Orders and shall remain valid until revoked.

**12VAC5-65-30. ~~Administration of regulations.~~ Purpose of Regulations**

~~These regulations shall be administered by the board and the commissioner.~~

~~1. The board shall have the responsibility to promulgate and amend, as appropriate, regulations governing EMS/DNR Orders.~~

~~2. The commissioner, pursuant to his authority under §32.1-20 of the Code of Virginia, shall administer these regulations.~~

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The Board has promulgated these regulations in order to carry out the intent of Virginia law that a person shall have the opportunity to execute a Durable DNR Order that comports with their wishes.

**12VAC5-65-40. ~~Application of regulations.~~ Administration of Regulations**

~~These regulations shall have general application throughout the Commonwealth.~~  
shall be administered by the following:

- A. **The State Board of Health** – The Board shall have the responsibility to promulgate and amend, as appropriate, regulations governing Durable DNR Orders;
  
- B. **The State Health Commissioner** – The Commissioner, pursuant to his authority under Code Section 32.1-20, shall administer these regulations.

**Part III**

~~**Requirements and Provisions**~~

**Article 1**

~~**Emergency Medical Services Do Not Resuscitate Order Form**~~



**REGULATIONS GOVERNING DURABLE  
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~~The EMS/DNR Order Form shall be a unique document printed on distinctive security paper and sequentially numbered, as approved by the board, and consistent with this chapter. The requirements and provisions of 12VAC5-65-60 through 12VAC5-65-100 shall apply to the approved EMS/DNR Order Form.~~

These regulations shall have general application throughout the Commonwealth.

**12VAC5-65-60. Content of the form. Effective Date of Regulations**

~~A valid EMS/DNR Order Form shall include (i) the attending physician's signed statement regarding the patient's medical condition and his Do Not Resuscitate determination as set forth in the order form, (ii) the patient's signed directives, or (iii) a designated agent's or authorized decision maker's signature, if applicable.~~

These regulations shall become effective once the promulgation process prescribed by Article 2 of the Administrative Process Act has been completed.

**Part III.****REQUIREMENTS AND PROVISIONS****Article 1.****General Provisions**

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**12VAC5-65-70. ~~Effective period for a signed EMS/DNR Order Form.~~ The Durable Do Not Resuscitate Order Form.**

~~A signed EMS/DNR Order Form shall be effective for no more than one year from the date the order is written. If the patient is still living at the end of that time, a new EMS/DNR Order Form may be executed and issued by the attending physician.~~

The Durable DNR Order Form shall be a unique document printed on distinctive paper, as approved by the Board, and consistent with these regulations. The following requirements and provisions shall apply to the approved Durable DNR Order Form.

A. Content of the Form – A Durable DNR Order Form shall contain, from a physician with whom the patient has a bona fide physician/patient relationship, a do not resuscitate determination, signature and the date of issue, the signature of the patient or if applicable the person authorized to consent on the patient's behalf.

B. Effective Period for a Signed Durable DNR Order Form – A signed Durable DNR Order shall remain valid until revoked.

C. Original Durable DNR Order Form – An original Durable DNR Order **or an alternate form that complies with 12 VAC 5-65-80** shall be valid for purposes of withholding or withdrawing cardiopulmonary resuscitation by qualified health care personnel in the event of cardiac or respiratory arrest in any facility, program or

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organization operated or licensed by the State Board of Health, or by the Department of Mental Health, Mental Retardation and Substance Abuse Services or operated, licensed or owned by another state agency. The original Durable DNR Order **or an alternate form that complies with 12 VAC 5-65-80** shall be maintained and displayed at the patient's current location or residence in one of the places designated on the form, or if traveling; should accompany the patient. **Photo**copies of the Durable DNR Order may be given to other providers or persons for information, with the express consent of the patient or the patient's designated agent or the person authorized to consent on the patient's behalf. However, such **photo**copies of the Durable DNR Order are not valid for withholding cardiopulmonary resuscitation.

D. Revocation of a Durable DNR Order – A Durable DNR Order may be revoked at any time by the patient (i) by physical cancellation or destruction by the patient or another in his presence and at his direction of the Durable DNR Order Form and/or any alternate form of identification; or (ii) by oral expression of intent to revoke. The Durable DNR Order may also be revoked by the patient's designated agent or the person authorized to consent on the patient's behalf.

E. Distribution of Durable DNR Order Forms - Authorized Durable DNR Forms, with instructions, shall be available only to physicians and to any facility, program or organization operated or licensed by the Board of Health, or by the

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Department of Mental Health, Mental Retardation and Substance Abuse Services  
or operated, licensed or owned by another state agency.

**12VAC5-65-80. Original EMS/DNR Order Form. Authorized Alternate Forms of  
Durable DNR Order Identification**

~~Only an original EMS/DNR Order Form, or an unaltered EMS/DNR Order Bracelet, as provided for in 12VAC5-65-110 of this chapter, or another Do Not Resuscitate Order, as provided for in 12VAC5-65-120, shall be valid for purposes of withholding or withdrawing cardiopulmonary resuscitation by qualified EMS personnel in the event of cardiac or respiratory arrest. The original form shall be maintained and displayed at the patient's home in one of the places designated on the form or shall accompany the patient, if traveling. Copies of the EMS/DNR Order Form may be given to other providers or persons for information, with the express consent of the patient or the patient's designated agent or authorized decision maker.~~

The Board authorizes the issuance of alternate forms of Durable DNR Order identification in conjunction with the issuance of Durable DNR Orders. These alternate forms shall be uniquely-designed and uniquely-identifiable bracelets and necklaces that are available from a vendor approved by the Virginia Department of Health. These alternate forms of identification must be purchased from the approved vendor by the person to whom a Durable DNR Order applies, or the person authorized to consent of the patient's behalf, and in conjunction with a Durable DNR Order. Such a necklace or

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bracelet may be utilized either to validate the Durable DNR Order or in place of an original Durable DNR Order in the event that the original Order is not readily available at the site where the person to whom the order applies is found. In order to be honored by qualified health care personnel in place of the original Durable DNR Order, this alternate form of identification must contain the minimum information approved by the State Board of Health.

**12VAC5-65-90. ~~Revocation of an EMS/DNR Order.~~ Other DNR Orders**

~~An EMS/DNR Order may be revoked at any time by the patient (i) by physical cancellation or destruction of the EMS/DNR Order Form and Bracelet by the patient or another in his presence and at his direction; or (ii) by oral expression of intent to revoke. The EMS/DNR Order may also be revoked by the patient's attending physician, or the designated agent or authorized decision maker for the patient.~~

A. Nothing in these regulations or in the definition of Durable DNR Orders provided in Section 54.1-2982 shall be construed to limit the issuance of, or the authorization of physicians and those persons designated in Section 54.1-2901 to follow Do Not Resuscitate Orders other than Durable DNR Orders for patients who are currently admitted to a hospital or other health care facility in accordance with accepted medical practice.

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B. Additionally, nothing in these regulations or in the definition of Durable DNR Orders provided in Section 54.1-2982 shall be construed to limit the authorization of qualified health care personnel to follow Do Not Resuscitate Orders other than Durable DNR Orders which are written by a physician, with whom the patient has a bona fide physician/patient relationship, for the duration of the patient's transfer to another facility. Such other DNR Orders issued in this manner shall be valid until a Durable DNR Order or other valid DNR Order is issued by the physician assuming responsibility for the treatment and care of the patient, but not to exceed twenty-four (24) hours. Such other DNR Orders issued in this manner shall contain the information listed in 12VAC5-65-70 A. and the time of issuance by the physician.

C. Nothing in these regulations shall prohibit qualified health care personnel from following any direct verbal order issued by a licensed physician not to resuscitate a patient in cardiac or respiratory arrest when such physician is physically present in attendance of such patient.

**PART IV.****IMPLEMENTATION PROCEDURES****12VAC5-65-100. ~~Distribution of EMS/DNR Order Forms.~~ Issuance of a Durable DNR Order**

Approved, sequentially numbered EMS/DNR Forms, with instructions, shall be available to physicians through local health department offices and local hospitals, and to private

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physicians, on request. Other distribution points may be approved by the commissioner to meet identified needs.

A. A Durable DNR Order may be issued to a patient by a physician, with whom the patient has established a bona fide physician/patient relationship, as defined by the Board of Medicine in their current guidelines, only with the consent of the patient or, if the patient is a minor or is otherwise incapable of making an informed decision regarding consent for such an order, upon the request of and with the consent of the person authorized to consent on the patient's behalf.

The physician shall explain to the patient or the person authorized to consent on the patient's behalf, the alternatives available, including issuance of a Durable DNR Order. If the option of a Durable DNR Order is agreed upon, the physician shall have the following responsibilities:

1. Obtain the signature of the patient or the person authorized to consent on the patient's behalf.
2. Execute and date the Physician Order on the Durable DNR Order Form.
3. Issue the original Durable DNR Order Form.
4. Explain how to, and who may revoke the Durable DNR Order.

B. The person to whom a DDNR order applies or the person authorized to consent on the patient's behalf must present the following information to the approved vendor in

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order to purchase and be issued an approved DDNR necklace or bracelet. The necklace or bracelet must contain the following information:

1. The patient's full legal name;
2. The DDNR number on the Virginia DDNR form or a number unique to the patient that is assigned by the vendor;
3. The doctor's name and phone number; and
4. The Virginia DDNR effective date.

**Article 2****EMS/DNR Order Bracelet**

**12VAC5-65-110. ~~The EMS/DNR Order Bracelet.~~ Durable DNR Order**

**Implementation Procedures**

~~An EMS/DNR Order Bracelet, as approved by the board, shall be issued with the EMS/DNR Order. Such EMS/DNR Order Bracelet shall be a uniquely designed, easily identifiable plastic identification bracelet containing the patient's name, Social Security Number, attending physician's name and telephone number, number of the EMS/DNR Order, and date of issuance and expiration of the order. An intact, unaltered, current EMS/DNR Bracelet may be honored by qualified EMS personnel in lieu of an original EMS/DNR Order Form.~~



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Qualified health care personnel shall comply with the following general procedures and published Virginia Durable DNR Order Implementation Protocols when caring for a patient who is in cardiac or respiratory arrest and who is known or suspected to have a Durable DNR Order in effect.

**A. Initial Assessment and Intervention**

Perform routine patient assessment and resuscitation or intervention until the Durable DNR Order or other DNR Order validity status is confirmed, as follows:

1. Determine the presence of a Durable DNR Order Form or an approved alternate form of Durable DNR identification.
2. Determine that the Durable DNR item is not altered.
3. Verify, through Driver's License or other identification with photograph and signature or by positive identification by a family member or other person who knows the patient, that the patient in question is the one for whom the Durable DNR Order or other DNR Order was issued.
4. If no Durable DNR Order or approved alternate form of identification is found, ask a family member or other person to look for the original Durable DNR Order Form or other written DNR order.

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5. If the Durable DNR Order or approved alternate form of identification is not intact or has been altered or other DNR Order is produced, the qualified health care personnel shall consider the Durable DNR Order to be invalid.

**B. Resuscitative Measures to be Withheld or Withdrawn**

In the event of cardiac or respiratory arrest of a patient with a valid Durable DNR Order under the criteria set forth above, the following procedures should be withheld or withdrawn by qualified health care personnel unless otherwise directed by a physician physically present at the patient location:

1. Cardiopulmonary Resuscitation (CPR)
2. Endotracheal Intubation or other advanced airway management
3. Artificial ventilation
4. Defibrillation
5. Cardiac resuscitation medications or
6. continuation of related procedures, as prescribed by the patient's physician or medical protocols.

**C. Procedures to Provide Comfort Care or to Alleviate Pain**

In order to provide comfort care or to alleviate pain for a patient with a valid Durable DNR Order or other DNR Order, the following interventions may be provided, depending on the needs of the particular patient:

1. Airway management (excluding intubation or advanced airway management)
2. Suctioning

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3. Supplemental oxygen delivery devices
4. Pain medications or intravenous fluids
5. Bleeding control
6. Patient positioning or
7. Other therapies deemed necessary to provide comfort care or to alleviate  
    pain.

**D. Revocation**

1. These regulations shall not authorize any qualified health care personnel to follow a Durable DNR Order for any patient who is able to, and does, express to such qualified health care personnel the desire to be resuscitated in the event of cardiac or respiratory arrest.
  - a. If the patient is a minor or is otherwise incapable of making an informed decision, the expression of the desire that the patient be resuscitated by the person authorized to consent on the patient's behalf shall so revoke the qualified health care personnel's authority to follow a Durable DNR Order or other DNR Order.
2. The expression of such desire to be resuscitated prior to cardiac or respiratory arrest shall constitute revocation of the Order; however, a new Order may be issued upon consent of the patient or the person authorized to consent on the patient's behalf.

**E. Documentation**

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1. When following a Durable DNR Order or other DNR Order for a particular patient, qualified health care personnel shall document in the patient's medical record the care rendered or withheld in the following manner:
  - a. Use standard patient care reporting documents (i.e. patient chart, pre-hospital patient care report).
  - b. Describe assessment of patient's status.
  - c. Document which identification (Durable DNR Order Form or other DNR Order or alternate form of identification) was used to confirm Durable DNR status and that it was intact, not altered, not canceled or not officially revoked.
  - d. Record the Durable DNR Order Number and name of patient's physician.
  - e. If the patient is being transported, keep the Durable DNR Order with the patient.

**F. General Considerations**

1. The following general principles shall apply to implementation of Durable DNR Orders.
  - a. If there is misunderstanding with family members or others present at the patient's location or if there are other concerns about following the Durable DNR

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Order or other DNR Order, contact the patient's physician or EMS medical control for guidance.

b. If there is any question about the validity of a Durable DNR Order, resuscitative measures should be administered until the validity of the Durable DNR is established.

**Article 3****Other Do Not Resuscitate Orders**

~~12VAC5-65-120. Other Do Not Resuscitate Orders.~~

~~As provided for in §54.1-2987.1 of the Code of Virginia, nothing in that section or the definition of Emergency Medical Services Do Not Resuscitate Orders provided in §54.1-2982 of the Code of Virginia shall be construed to limit the issuance of or the authorization of physicians and those persons designated in §54.1-2901 of the Code of Virginia to follow Do Not Resuscitate Orders other than Emergency Medical Services Do Not Resuscitate Orders. In accordance with this provision, qualified emergency medical services personnel or hospital emergency department health care providers may honor other Do Not Resuscitate Orders in a patient's chart, provided such order includes the patient's full legal name, the physician's signature, and the date issued.~~

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**Part IV****Implementation Procedures**

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**Article 4****Issuance of an EMS/DNR Order****12VAC5-65-130. Issuance of an EMS/DNR Order.**

~~An EMS Do Not Resuscitate Order may only be issued by an attending physician for a patient who has been diagnosed as having a terminal condition or other advanced chronic illness or condition which, in the physician's judgment, warrants the issuance of such order and when such patient or the patient's agent or authorized decision maker so directs. If the patient is not an adult, the physician shall carefully review with the parents or legal guardian all of the implications of this decision. The physician shall explain to the patient or, if pertinent, his agent or his family the alternatives available, including issuance of an EMS/DNR Order. If the option of an EMS/DNR Order is agreed upon, the attending physician shall have the following responsibilities:~~

- ~~1. Obtain the signature of the patient or designated agent or authorized decision maker or the spokesman for a majority of the highest class of decision makers.~~

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- ~~2. Execute and date the physician order on the EMS/DNR Order Form.~~
  
- ~~3. Issue the original EMS/DNR Order Form and Bracelet and place bracelet on patient.~~
  
- ~~4. Explain how and by whom the EMS/DNR Order may be revoked.~~

~~Article 2~~

~~EMS Do Not Resuscitate Implementation Procedures~~

~~12VAC5-65-140. General.~~

~~Qualified emergency medical services personnel shall conform with the general procedures and published State EMS/DNR Order Implementation Protocols when responding to a patient who is in cardiac or respiratory arrest and who is known or suspected to have an EMS/DNR Order in effect.~~

~~12VAC5-65-150. Initial assessment and intervention.~~

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Perform routine patient assessment and resuscitation or intervention until EMS/DNR

~~Order or other DNR Order status is confirmed, as follows:~~

~~1. Determine that EMS/DNR Order Bracelet is intact and not defaced or that the original EMS/DNR Order Form or other DNR Order is present and current.~~

~~2. Verify, through driver's license or other identification with photograph and signature or by positive identification by a family member or other person who knows patient, that the patient in question is the one for whom the EMS/DNR Order was issued.~~

~~3. If no EMS/DNR Order Bracelet is found, ask family member or other person to look for the original EMS/DNR Order Form or other written DNR order.~~

~~4. If the EMS/DNR Order Bracelet is not intact on the patient's arm or has been defaced, and if no valid EMS/DNR Order Form or other DNR Order is produced, consider the EMS/DNR Order to be invalid.~~

~~12VAC5-65-160. Resuscitative measures to be withheld or withdrawn.~~

~~In the event of cardiac or respiratory arrest of a patient with a valid EMS/DNR Order under the criteria set forth in 12VAC5-65-150 of this chapter, the following procedures should be withheld or withdrawn by qualified EMS personnel or~~



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~~hospital emergency department health care providers, unless otherwise directed by the attending physician:~~

- ~~1. Cardiopulmonary resuscitation (CPR).~~
  - ~~2. Endotracheal intubation or other advanced airway management.~~
  - ~~3. Artificial ventilation.~~
  - ~~4. Defibrillation.~~
  - ~~5. Cardiac resuscitation medications.~~
  - ~~6. Related procedures, as defined by attending physician or medical protocols.~~
- ~~12VAC5-65-170. Procedures to provide comfort care or to alleviate pain.~~

~~In order to provide comfort care or to alleviate pain for a patient with a valid EMS/DNR Order or other DNR Order, the following interventions may be provided, depending on the needs of the particular patient:~~

- ~~1. Airway (excluding intubation or advanced airway management).~~

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~~2. Suction.~~

~~3. Oxygen.~~

~~4. Pain medications (Advanced Life Support personnel only).~~

~~5. Control bleeding.~~

~~6. Make patient comfortable.~~

~~7. Be supportive to patient and family.~~

~~12VAC5-65-180. Revocation.~~

~~The patient, the attending physician, or the patient's designated agent or authorized decision maker may revoke the EMS/DNR Order at any time, as provided in 12VAC5-65-90 of this chapter. If an EMS/DNR Order is revoked by one of these authorized persons, EMS personnel shall resume full resuscitation and treatment of the patient.~~

~~12VAC5-65-190. Documentation.~~

~~When following an EMS/DNR Order or other DNR Order for a particular patient, EMS personnel shall document the response in the following way:~~

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1. Use a standard prehospital patient care report form.
2. Describe assessment of patient's status.
3. Document which identification (EMS/DNR Order Form or Bracelet) was used to confirm EMS/DNR status and that it was intact, not defaced, not canceled, or not officially revoked.
4. Record actual EMS/DNR Order number as well as name of patient's attending physician.
5. If transporting the patient, keep original EMS/DNR Order Form with the patient.

12VAC5-65-200. General considerations.

The following general principles shall apply to implementation of EMS Do Not Resuscitate Orders:

1. If there is misunderstanding with family members or others present at the scene or if there are other concerns about following the EMS/DNR Orders, contact the attending physician or EMS medical control for guidance.

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~~2. If there is any question about the validity of an EMS/DNR Order, resuscitate.~~

~~3. An EMS/DNR Order does not mean do not treat otherwise or do not provide appropriate care. Provide all possible comfort care and treat patient and family with care and concern.~~

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VIRGINIA DEPARTMENT OF HEALTH**

Order Number: \_\_\_\_\_

Date Order Written: \_\_\_\_\_

Patient's Full Legal Name \_\_\_\_\_

**Physician's Order**

I, the undersigned, state that I have a bona fide physician/patient relationship with the patient named above. I have certified in the patient's medical record that he/she has directed that life-prolonging procedures be withheld or withdrawn in the event of cardiac or respiratory arrest.

I further certify: [must check 1 or 2]

1. The patient is CAPBLE of making and informed decision about providing, withholding or withdrawing a specific medical treatment or course of medical treatment. (Signature of patient is required; **see reverse**).
2. The patient is incapable of making an informed decision about providing, withholding or withdrawing a specific medical treatment or course of medical treatment because he/she is unable to understand the nature, extent or probable consequences of the proposed medical decision, or to make a rational evaluation of the risks and benefits of alternatives to that decision.

If you checked 2 above, (the patient is incapable of making an informed decision), check 1, 2 or 3 below:

1. The patient has executed a written advance directive which directs that life-prolonging procedures be withheld or withdrawn.
2. The patient has executed a written advanced directive which appoints a Person Authorized to Consent on the Patient's Behalf with authority to direct that life-prolonging procedures be withheld or withdrawn. (Signature of Person Authorized to Consent on the Patient's Behalf is required, **see reverse**).
3. The patient has not executed a written advance directive (living will or durable power of attorney for health care). (Signature of Person Authorized to Consent on the Patient's Behalf is required, **see reverse**).

I hereby direct any and all qualified health care personnel, commencing on the effective date noted above, to withhold cardiopulmonary resuscitation (cardiac compression, endotracheal intubation and other

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advanced airway management, artificial ventilation, defibrillation and related procedures) from the patient in the event of the patient's cardiac or respiratory arrest. I further direct such personnel to provide the patient other medical interventions, such as intravenous fluids, oxygen or other therapies deemed necessary to provide comfort care or alleviate pain.

\_\_\_\_\_  
Printed Name

Signature of Physician

Emergency Telephone Number: \_\_\_\_\_

**PATIENT'S SIGNATURE**

I, the undersigned, hereby direct that in case of my cardiac or respiratory arrest, efforts at cardiopulmonary resuscitation not be initiated. I understand that I may revoke these directions at any time by physical cancellation or destruction of this form or by orally expressing a desire to be resuscitated to qualified health care personnel. I also understand that if qualified health care personnel have any doubts about the applicability or validity of this order, they will begin cardiopulmonary resuscitation.

\_\_\_\_\_

Signature of Patient

**Signature of Person Authorized to Consent on the Patient's Behalf**

I, the undersigned, hereby certify that I am authorized to provide consent of the patient's behalf by virtue of my relationship to the patient as

\_\_\_\_\_ (in order of priority: designated agent, guardian or committee, spouse, adult child, parent, adult brother or sister, other relative in descending order of blood relationship). In that capacity, I hereby direct that in case of the patient's cardiac or respiratory arrest, efforts at cardiopulmonary resuscitation not be initiated. I understand that I may revoke these directions at any time by physical cancellation or destruction of this form or by orally expressing a desire to be resuscitated

**REGULATIONS GOVERNING DURABLE  
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to qualified health care personnel. I also understand that if qualified health care personnel have any doubts about the applicability or validity of this order, they will begin cardiopulmonary resuscitation of the patient.

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Signature of Person Authorized to Consent on the Patient's Behalf

**PLACES: EMS PERSONNEL WILL LOOK FOR THIS ORDER IN THE FOLLOWING**

- ① On the back of the door leading to the patient's bedroom,
- ② On the bedside table, beside the patient's bed,
- ③ On the refrigerator, or
- ④ In the patient's wallet