



**Emergency Medical Services
Do Not Resuscitate Order**

**SOUTH CAROLINA
EMERGENCY MEDICAL SERVICES**



DO NOT RESUSCITATE ORDER

NOTICE TO EMS PERSONNEL

This notice is to inform all emergency medical personnel who may be called to render assistance to

_____ that he/she has a terminal condition which has been diagnosed by me and is at
(Name of Patient)
least eighteen (18) years of age, and has specifically requested that no resuscitative efforts including artificial stimulation of the cardiopulmonary system by electrical, mechanical, or manual means be made in the event of cardiopulmonary arrest.

REVOCATION PROCEDURE

THIS FORM MAY BE REVOKED BY AN ORAL STATEMENT BY THE PATIENT TO EMS PERSONNEL, OR BY MUTILATING, OBLITERATING, OR DESTROYING THE DOCUMENT IN ANY MANNER.

Date Patient's Signature (or Surrogate or Agent)

Physician's Name (Please Print) Physician's Signature

Physician's Address Physician's Telephone Number

**DNR INFORMATION FOR THE PATIENT, THE PATIENT'S FAMILY,
THE HEALTH CARE PROVIDER AND EMS PERSONNEL**

1. Responsibilities of the Patient or his/her Surrogate or Agent

The patient and his/her surrogate or agent:

Will make all care givers aware of the location of the EMS DNR Form and will ensure that the form is displayed in such a manner that it will be visible and available to EMS personnel.

Understanding the consequences of refusing resuscitative measures.

Are aware that if the form is altered in any manner resuscitative measures will be initiated.

Understand that in all cases, supportive care will be provided to the patient.

2. Responsibilities of the Health Care Provider (Physician)

The patient's physician:

Has determined that the patient has a terminal condition.

Has completed the patient's EMS DNR Form.

Has explained to the patient and family the consequences of withholding resuscitative care; the medical procedures that will be withheld and the palliative and supportive care that will be administered to the patient.

3. Responsibilities of EMS Personnel

EMS personnel:

Will confirm the presence of the EMS DNR Form and the identity of the Patient.

Upon finding an unaltered EMS DNR Form, will withhold or withdraw resuscitative measures such as CPR, endotracheal intubation or other advanced airway management, artificial ventilation, defibrillation, cardiac resuscitation medication and related procedures.

Will provide palliative and supportive treatment such as suctioning the airway, administration of oxygen, control bleeding, provision of pain and non-cardiac medications, provide comfort care and provide emotional support for the patient and the patient's family.

Will assure that the DNR Form accompanies the patient during transport.

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