

# Advance Care Planning Information: The Basics of CPR



## Advance Care Planning

Knowing your voice is heard when making decisions about health care is important. Advance care planning is the process of preparing for a time when you may not be able to make your own medical decisions. The best time to make these decisions is when you are able to make your own choices.

## Health Care Agent

Discussing and sharing your wishes with your loved ones, health care team, and health care agent is important. A health care agent makes health care decisions based on your wishes if you are unable to communicate.

## Health Care Directive

By writing a health care directive, you can make your voice heard so your wishes are followed. A health care directive is a written plan outlining your values and priorities for your future medical treatment.

## What is cardiopulmonary resuscitation (CPR)?

CPR is an attempt to re-start the heart when someone has stopped breathing and the heart has stopped beating.

## What happens during a CPR attempt?

TV often makes CPR look quick and easy, but in reality, it is not. The chest is pushed on, down to two inches, 100 times each minute repeatedly. A special mask and bag and then a breathing tube into the mouth and down the trachea (windpipe) is used to pump air into the lungs. Electrical shocks may be given to the chest. An IV (tube into a vein) is usually placed to deliver medications.

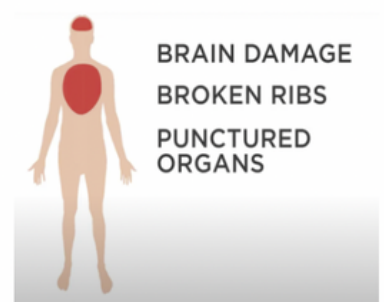
## Does CPR work?

Studies show that about 15% of all people who have CPR attempted live through it. How well CPR works depends on the person's age, health, location and how quickly CPR is started after the heart has been stopped. Even if CPR is successful, CPR does not fix or improve the reason that caused the person's heart to stop or that the person will fully recover.



## Injuries that may occur from attempted CPR

The lack of blood to the brain due to the heart not beating can cause brain damage in only a few minutes. Up to half of people will have brain damage that will not get better. Almost all will have broken ribs and bruising; some may get burns on the skin from shocks, lung damage and bleeding in the chest as well as damage to the windpipe, lips and teeth. A long-term affect may include not being able to live alone (IPPC, 2018).



## What if I decide that I want to try my healthcare team to attempt CPR?

If CPR attempt is the choice, talk about what results would be expected. The person may not be able to breathe without a machine (ventilator), not be able to communicate for some time, or to think, talk or know anyone. The person may be in a sedated or coma like state. The person will be cared for in an Intensive Care Unit and the healthcare agent or decision maker would be kept informed and need to make decisions. It is important to have a healthcare directive for the decision maker to know other choices.

## What happens if I decide that I do NOT want CPR?

Not attempting CPR requires a medical order called Do Not Resuscitate or DNR. Without this order, by default, all possible life saving treatments are started. DNR does not mean Do Not Treat. CPR is only one kind of treatment. If the choice is not to have CPR attempted, the person would be allowed to die naturally. There are many other care and treatments that can be given to keep a person comfortable. Whether or not CPR is attempted, ALL other medical care and treatments that that are chosen will be given.

## How do I decide if I want my healthcare team to attempt CPR or not?

Which option best matches the person's values and goals. It is also important to think about the risks and benefits of CPR to determine what is the right choices. Talk to doctors, nurses, social workers and about the chances of survival and what life may be life after CPR is attempted. It always is the choice of the individual or their decision maker if the person is unable to respond with a decision. Choices can change at any time.

## How do I make my decisions known about CPR?

- Tell your provider, healthcare agent, family members, and friends
- Complete a healthcare directive or POLST form to note your personal medical preference
- Give copies of your completed healthcare directive or POLST form to your provider, healthcare agent, family members, and friends

### References/Resources:

Coalition for Compassionate Care of California (CCCC). (2015, October 21). *CPR. Your chances of survival are better on TV.*

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Indiana Patient Preferences Coalition (IPPC). (2018, June 22). *POST Basics: An overview of important treatment decisions.* <https://www.youtube.com/watch?v=ci7KIDJQpFU>

Joyner, N. (2021). *What if the doctor asks you about CPR?* <https://www.nancyjoyner.com/>

Respecting Choices®. (2018). *Cardiopulmonary resuscitation decision aid.* [https://respectingchoices.org/wp-content/uploads/2020/03/Decision\\_Aid\\_CPR.pdf](https://respectingchoices.org/wp-content/uploads/2020/03/Decision_Aid_CPR.pdf)

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For more information about advance care planning or for help creating a Health Care Directive, contact your health care provider or Advanced Care Planning of North Dakota

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