

Education on CPR for Residents/Patients and their Representatives

The Problem

Many health problems are so serious that they cause your heart to stop beating. This is called cardiac arrest. When this happens, you also stop breathing.

The heart pumps blood to all organs in your body to give them oxygen. When your heart stops beating, your body and brain do not get enough oxygen for you to live.

Treatment

There is only one treatment when your heart stops beating. That treatment is cardio-pulmonary resuscitation or CPR. CPR is done to try to restart the heartbeat and breathing. It is the only treatment that could save your life when your heart stops beating.

CPR involves rapidly pushing on your chest, and placement of a tube through the mouth into the lungs to directly help you breathe. Sometimes electric shocks are given using a device called a defibrillator. Once started, CPR is continued until your heart restarts or it is clear beyond a doubt that your heart cannot be restarted.

CPR can be started in the SNF/NF, but as soon as possible, you will be transferred to

the hospital, often an intensive care unit, for additional treatment and monitoring.



Your Choice

CPR is a choice – it is not a treatment that everyone must have. Some people believe that when their time comes or their heart or breathing stops, nothing more should be done to keep them alive. Other people want everything done to keep them alive. Neither of these choices is right or wrong. It is your choice.

You should understand, however, that if you choose not to have CPR, your choice will not affect any other aspect of your care.

All of your other treatments and care will continue.

The only thing that will change is that if you are found without a pulse or heartbeat (*in cardiac arrest*) CPR will not be done.



(continued on reverse)

Education on CPR for Residents/Patients and their Representatives

(cont'd)

Making the Decision: CPR or DNR

Many people make a decision in advance about whether or not they want CPR. You can choose between having CPR and asking for a 'Do Not Resuscitate (DNR)' order. If you choose the DNR order, CPR will not be done if your heart stops beating. You are unlikely to be able to make this decision for yourself at the time your heart stops beating. Making the decision in advance will help make sure that your wishes are carried out.

The decision whether or not to have CPR can be a difficult one. You may want to discuss it with your family, doctor, nurse, social worker, or a religious leader.

Understanding the benefits and risks of CPR is important when you make your decision. The chart below explains the benefits and risks of CPR.



Benefits of CPR

If your heart stops beating, CPR is the only treatment that could save your life. However, you should also know that the rate of surviving CPR is low.

- On average less than 1 in 10 people who receive CPR outside of a hospital survive.
- The chances of surviving CPR are even lower in people of advanced age, and in people with serious medical problems such as advanced forms of cancer and diseases of the heart, kidneys, and liver.

Risks of CPR

Although in some cases CPR can save your life, CPR itself can cause bodily harm. For example:

- Many people, especially older people with thin bones, suffer broken ribs as a result of CPR.
- There is a small chance that if you survive CPR, you can have severe brain damage or be in a coma for some time or even the rest of your life

Help in Making Your Decision

There are many resources available to you in making this decision. Organizations such as the American Association for Retired Persons, the Coalition for Compassionate Care, the Conversation Project, Closure, and Caring Connections of the National Hospice and Palliative Care Organization, as well as many others



have information available in print and on their websites that may be helpful to you.

In addition, most states have standard forms for documenting your decisions in advance ('Advance Directives'), and many are recommending completing an order form in advance, such as Physicians Orders for Life Sustaining Treatment ('POLST') or other similar forms.