

Recognized DNR Options in New Hampshire

1. The following are the only recognized DNR options in New Hampshire:
“P-DNR” (portable DNR) order: statewide recognized document of any color and/or a “DNR” (Portable DNR) wallet card signed by a physician or Advanced Practiced Registered Nurse (APRN).
2. Medical orders form documenting the patient’s name and signed by a physician or APRN and that clearly documents the DNR order.
3. DNR bracelet or necklace worn by a patient, inscribed with the patient’s name, date of birth (in numerical form), and “NH DNR” or “NH Do not resuscitate.”

Note: Under state law, a DNR bracelet or necklace may only be issued to patients who have a valid DNR order.

Neither a Living will nor a Durable Power of Attorney for Healthcare (DPOAH) form is a valid DNR order. Neither a patient’s spouse nor a healthcare agent under a DPOAH may direct EMS providers to withhold resuscitation in the absence of a valid DNR Order.

When a written DNR order is not available but the patient has a DPOAH and the patient’s healthcare agent requests that resuscitation be withheld, contact online **Medical Control** for guidance.



For patients present or residing In a healthcare facility, the following is also acceptable

A DNR order written by a physician or APRN at the nursing home, hospital, or other healthcare facility issued in accordance with the healthcare facility’s policies and procedures.

For Patients Being Transferred

All forms of DNR identified above remain valid during a transfer from one healthcare facility to another.

DNR Orders from Other States

EMS providers should honor any DNR order that is substantially similar to the NH statutory form. (see NH form below) Medical orders from other states must be signed by a physician or APRN that clearly documents the DNR order.

Revocation of a DNR Order

The following are the only recognized methods for revoking a DNR order:

Patients residing at home

- A patient residing at home may revoke a DNR order by destroying the DNR order and removing a DNR bracelet or necklace.
- If the patient lacks the capacity to make health care decisions, the patient’s healthcare agent (under a DPOAH—see below) may revoke the DNR order by destroying the DNR order and removing any DNR bracelet or necklace.

Patients residing in a healthcare facility

- A patient in a healthcare facility may revoke his or her previous consent to a DNR order by making a written, oral, or other act of communication to the attending physician or APRN or other professional staff of the healthcare facility.
- For a patient who lacks the capacity to make health care decisions, the patient’s healthcare agent (under a DPOAH—see below) may revoke a DNR order by notifying the attending physician or APRN in writing or, if a witness over the age of 18 is present, orally.

Policy Continues

Policy Continued

Procedures not to be Performed

If there is a valid DNR order and the patient is in cardiac or respiratory arrest, or cardiac or respiratory arrest is imminent, EMS providers should observe the following guidelines:

- Do not perform chest compressions.
- Do not actively assist ventilations via BVM.
- Do not intubate or place advanced airway devices.
- Do not defibrillate.
- Do not administer resuscitation drugs to treat cardiac arrest or the rhythms identified below:
 - Ventricular fibrillation.
 - Pulseless ventricular tachycardia.
 - Pulseless electrical activity.
 - Asystole.

Procedures that may be performed

If the patient is not in imminent cardiac or respiratory arrest, all appropriate medical treatment for all injuries, pain, difficult or insufficient breathing, hemorrhage, and/or other medical conditions should be provided despite the presence of a DNR order. Competent patients (and healthcare agents) retain the right to refuse any treatments indicated.

EMS providers **MAY** perform any other measures, including comfort measures, for these patients, within their scope of practice per the usual treatment guidelines, including but not limited to:

- Oxygen therapy via nasal cannula, non-rebreather mask, and/or CPAP.
- Medications for treatment of pain, respiratory distress, dysrhythmias (except for those identified above).
- Intravenous fluid therapy for medication access and/or delivery.
- Mouth or airway suctioning.

NH Statutory DNR Form

Do Not Resuscitate Order.

As attending physician or APRN of [patient's name here] and as a licensed physician or Advanced Practice Registered Nurse, I order that this person **SHALL NOT BE Resuscitated** in the event of cardiac or respiratory arrest.

This order has been discussed with [patient's name here] (or, if applicable, with his/her agent,) [name of DPOAH], who has given consent as evidenced by his/her signature below.

Attending physician or APRN name: _____

Attending physician or APRN signature: _____

Address: _____

Patient signature: _____

Address: _____

Agent signature (if applicable): _____

Address: _____

Policy Continues

8.8 Provider Orders for Life Sustaining Treatment (POLST) and Advanced Directives

← Policy Continued

Durable Power of Attorney for Healthcare

Under a Durable Power of Attorney for Healthcare, a patient may designate another person—a healthcare agent—to make health care decisions for themselves.

- Before a healthcare agent may make decisions on behalf of the patient, the patient's attending physician or APRN must certify in writing that the patient lacks capacity (this certification is filed within the patient's medical record).
- A patient who, in the clinical judgment of the EMS provider, retains the capacity to make health care decisions, shall direct his or her health care, even where a healthcare agent has been appointed. That is, EMS providers shall follow the wishes of the patient rather than the healthcare agent unless the patient lacks the capacity to make health care decisions.
- The healthcare agent must make an informed decision. It is generally advisable for EMS providers to perform at least a preliminary assessment and inform the healthcare agent of the options for caring for the patient.



Note: in the absence of a valid DNR order, a healthcare agent does not have the authority to direct prehospital providers to withhold resuscitation in the event of a cardiac arrest. When a written DNR order is not available and a DPOAH is present and requests that resuscitation be withheld, contact online **Medical Control** for guidance.

Living Will

A Living Will is intended to address patients who have been admitted to a healthcare facility. Living Wills rarely, if ever, have application in the prehospital environment.

POLST (Provider Orders for Life-Sustaining Treatment)

Section A

The POLST constitutes a DNR if it states *'This will constitute a DNR Order, and no separate DNR Order will be required.'* Otherwise, if the patient has indicated they do not want resuscitation but does not have a separate valid DNR order, contact Medical Control for guidance

Section B

When confronted with a seriously ill patient who has a POLST form (yellow form), and is not in cardiac arrest: see [POLST Appendix A5](#)

- If "Full Treatment" box is checked: Use all appropriate measures to stabilize/resuscitate patient.
- If "Selective Interventions" box is checked: The maximum respiratory interventions are non-rebreather mask, CPAP, and suctioning. All appropriate IV medications may be utilized. No electrical therapies are to be provided.
- If "Comfort-focused Care" box is checked: Limit respiratory interventions to non-rebreather mask, suctioning and treatment of airway obstruction, as needed. Medications to relieve pain or discomfort may be utilized.

Note: Section C refers to IV therapy for hydration and nutrition. Advanced EMTs and Paramedics may start an IV for the purpose of medication administration outlined in Section B.

PEARLS:

- Your decision to withhold resuscitation is protected under the New Hampshire DNR law as long as it is based on the good faith belief that you have been presented with a valid DNR order or DNR jewelry.