

DIVISION OF GUARDIANSHIP Life Saving Measures (DNR)	DAIL-GField-33
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Policy Statement

If the Cabinet has been granted the authority by the court to make healthcare decisions, the individual under guardianship's code status will always be Full Code unless:

- a. The individual had executed an advance directive prior to being declared disabled which have been reviewed for validity by the DAIL Nurse Consultant;
- b. A health care surrogate designated by the individual has executed an advance directive which have been reviewed for validity by the DAIL Nurse Consultant ;
- c. A prior court-appointed guardian of the individual has executed an advance directive concerning the individual under guardianship which have been reviewed for validity by the DAIL Nurse Consultant; or
- d. A Cabinet nurse consultant or the Guardianship Advisory Committee, as determined by the DAIL Commissioner, has determined the individual meets criteria as defined in the Cabinet Protocol for Making Health Care Decisions to be changed to code status of Do Not Resuscitate.

Do not resuscitate (DNR) means that if the heart stops beating or if breathing stops no medical procedure to restart breathing or heart function, more specifically the insertion of a tube into the lungs, or electrical shocking of the heart or cardiopulmonary resuscitation (CPR) will be started. Having a DNR code status will not prevent medical personnel from providing other medical care.

Legal Authority:

- [KRS 311.621 thru KRS 311.643 KY Living Will Directive Act](#)
- [KRS 387.640 Duties of the limited guardian or guardian](#)
- [KRS 387.660 Specific powers and duties of guardian](#)
- [KRS 311.6231 Bound by terms of grantor's advance directive. Power of surrogate to act](#)
- [Woods v. Commonwealth, 142 S.W.3d 24 \(KY 2004\)](#)
- [910 KAR 2:040. Section 24. Life Saving Measures.](#)

Procedure:

- (1) When the individual has an advance directive executed under KRS 311.623, the guardianship program is bound by the terms of the individual's advance directive once it has been determined valid by the DAIL Nurse Consultant.
 - (a) The GSSW or designee shall forward the advanced directive to the DAIL Nurse Consultant immediately when received;
 - (b) The DAIL Nurse Consultant will review for validity and determine

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- whether or not DAIL can honor the advance directive;
- (c) The DAIL Nurse Consultant will notify the GSSW or designee.
- (2) If the advance directive designates a surrogate to make health care decisions for the individual, the surrogate may continue to act:
- (a) As long as the surrogate is willing and capable to continue to act in the capacity of health care surrogate; and
 - (b) The district court overseeing the guardianship case is aware of healthcare surrogacy and has ruled on their ability to continue to act.
- (3) When there is not an advance directive already established or the designated surrogate is unable or unwilling to act: The DAIL nurse consultant shall review any request to change code status from Full Code to Do Not Resuscitate (DNR) for an individual for whom the Cabinet has the authority to make health care decisions when:
- (a) An attending physician, after clinical examination, advises the nurse consultant or designee that the individual has a terminal condition; is permanently unconscious; or has a co-morbid condition in which two (2) or more coexisting medical conditions compromise the individual's chance of recovery or of benefiting from active treatment; and
 - (b) The physician requests that the individual's code status be changed to DNR.
- (4) The DAIL nurse consultant or designee:
- (a) Sends the DAIL-DNR-01 form to be completed and signed by one (1) physician who has evaluated the individual,; and
 - (b) Receives the completed DNR request form and diagnostic documentation or testing to substantiate the diagnosis (es) listed on the DNR form by the physician. The DAIL nurse consultant shall review and make a determination for code status change within three (3) business days from the date of receipt of the completed request.
- (5) The GFSOS, GSSW, or designee:
- (a) Ensures that the individual's code status remains full code until consultation has been sought with the nurse consultant or the Guardianship Advisory Committee to change the individual's code status to DNR;
 - (b) Directs the facility staff or physician requesting a DNR to the nurse consultant;
 - (c) May relay DNR process information and DNR request form on behalf of the nurse consultant during afterhours.
- (6) The DAIL nurse consultant determines if the individual meets criteria according to the Cabinet's protocol or defers the request to change the individual's code status DNR to the Guardianship Advisory Committee, as determined by the

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DAIL Commissioner.

- (7) The DAIL nurse consultant electronically notifies the GFSOS and GSSW of the determination that has been made regarding the individual's code status.
- (8) Once field services staff receives the electronic notification of approval, the GSSW or designee shall give verbal notification to the facility as soon as possible.
- (9) The DAIL Nurse Consultant shall follow the verbal notification for code status change by issuing the involved facilities a written statement regarding the final decision (GF-008 Approval Letter to Facility). The written statement shall be issued to involved facilities within twenty-four (24) hours of the verbal notification, with exception of afterhours, weekends, or holidays, in which the written approval statement will be provided the following business day.
- (10) The GSSW or designee shall complete a facility's or Emergency Medical Services' (EMS) Kentucky Emergency Medical Services Do Not Resuscitate (DNR) order if requested by the involved facility.
- (11) The DAIL Nurse Consultant shall ensure the written DNR approval has been provided to the facility and is attached into an event in KYGFIS.
- (12) The DAIL Nurse Consultant enters a notation of the change in the individual's code status to Do Not Resuscitate (DNR) in KYGFIS on the individual's face sheet in the end-of-life decision drop down box.
- (13) The DAIL nurse consultant or designee shall scan and attach all applicable documentation, including the electronic communication for DNR approval, into an event in KYGFIS.
- (14) If the individual's medical condition improves significantly, any party involved, including the GSSW may review and make a request to change the code status back to full code.