



Memphis Fire Dept.

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Call#

Booklet ID or Matching Number

Image Type

5

Do not attach anything Above this area

Patient First Name

Patient Last Name

## Withholding / Discontinuation of Life Support Checklist

### Withholding Life Support Criteria

*(Circle all that apply)*

1. Patient is obviously dead with dependent lividity, rigor mortis, tissue decomposition, or massive trauma such as evacuation of the cranial vault.
2. Patient is without vital signs and cannot be assessed for treatment due to entrapment for prolonged time period.
3. Severe blunt trauma with absence of vital signs and papillary response.
4. A valid DNR or POST form is present. (must be included with run report)
  - a. DNR and POST orders not on the official state form can be accepted if it is documented in a medical record such as a nursing chart, hospice care, or home nursing chart. (must be included with run report)
5. The patient's private physician is on scene, takes direct responsibility for withholding resuscitation efforts.

### Discontinuation of Life Support after Field Initiation Criteria

*(Circle all that apply)*

1. Asystole is present on the EKG in two leads ninety degrees apart, **and**
2. The patient had fixed, dilated pupils prior to the administration of Atropine, **and**
3. There is absence of pulse, respirations, and neurological reflexes **and** at least **ONE** of the following conditions are met:
  - a. Endotracheal intubation has been confirmed, the patient has been well ventilated with 100% oxygen and multiple (at least three) administrations of Epinephrine and Atropine have not been effective in generating an EKG complex.
  - b. Transcutaneous pacing, if available, has not been effective in generating an EKG complex.
  - c. Obvious signs of death in the absence of hypothermia, cold water drowning, lightning strikes or induced coma.
  - d. The FF/Paramedic can document lack of CPR for at least 10 minutes, **or**
  - e. Prolonged resuscitation in the field without hope for survival, **or**
  - f. Massive trauma such as evacuation of cranial vault, etc., **or**
  - g. Severe blunt trauma with absence of vital signs and pupillary response.

**Upon field termination, any tubes, needles, and IV lines will be left in place (IV lines to be tied off and cut with catheter in place).**

Provider Signature \_\_\_\_\_

Date \_\_\_\_\_

Do not attach anything below this area