

Remember...

A DNR bracelet may be worn only if you have been issued a valid Nonhospital Order Not to Resuscitate, signed by your doctor. **Your doctor MUST use form DOH-3474.**

If You Change Your Mind

You, or anyone who consents to a DNR order on your behalf, can remove the order by telling doctors, nurses or others about the decision. This need not be done in writing. Once informed of your wishes, your physician must record the DNR revocation in your chart, cancel the DNR order and make diligent efforts to retrieve all copies of your DNR form, as well as your DNR bracelet.

Health Care Proxy

New York's Health Care Proxy Law allows you to appoint someone you trust — for example, a close friend or family member — to decide about your medical treatment if you lose the ability to decide for yourself. Request a free Health Care Proxy form by writing to "Health Care Proxy," Box 2000, Albany, NY 12220.

State of New York

State of New York
Department of Health

Nonhospital

DNR



spells it out

About DNR

DNR stands for “Do Not Resuscitate.” A DNR order means that if cardiac arrest occurs — if your heart stops beating and you stop breathing — cardiopulmonary resuscitation (CPR) will not be performed to revive you. A consent to a DNR order, whether in a hospital or nonhospital setting, is a type of advance instruction you may give about your treatment. Any adult may request a DNR order.

Who May Request a DNR Order on Your Behalf

When you are unable to decide about your own medical care, and have appointed a health care agent under the health care proxy law, that person should decide about CPR and other treatments for you. When you are sick and unable to tell your doctor that you want a DNR order written, but have not appointed a health care agent, a family member or close friend can decide about CPR for you under one of four special circumstances. A family member or someone close to you may consent to a DNR order only if TWO physicians determine that you are too ill to decide for yourself and one of the following circumstances exists:

- you are terminally ill with no hope of recovery;
- you are permanently unconscious;
- due to your medical condition, you would be harmed more than helped by CPR; or
- resuscitation would be medically futile.

DNR Orders Outside the Hospital

You may ask your doctor to sign a New York State Department of Health Nonhospital Order Not To Resuscitate (form DOH-3474).

A Nonhospital Order Not to Resuscitate may be issued while you are hospitalized to take effect after your discharge. It may also be issued if you are not in a hospital. That means that at home, or elsewhere outside the hospital setting (including in an emergency room), emergency medical services personnel will NOT perform CPR on you. **But they can't withhold CPR unless they are sure you have a valid DNR order.**

Under state law, emergency medical services personnel who are presented with a valid DNR form, signed by your doctor, **or who identify a standard DNR bracelet on you**, must comply with the DNR order.

DNR Bracelet

The chain link bracelet has a stainless steel plate bearing the traditional medical symbol on the front and DO NOT RESUSCITATE in big block letters on the back. DNR bracelets alert emergency medical services personnel that a valid nonhospital DNR order is in effect. You can have a valid nonhospital DNR order without wearing a DNR bracelet — the bracelet is purely voluntary. Under the law, **a bracelet may not be issued unless you first present the proper form, signed by your doctor.**

How to Get a DNR Bracelet

Write to the New York State Department of Health, Box 2000, Albany, NY 12220, and request a “Nonhospital Order Not To Resuscitate” (form DOH-3474). Along with the form, you will receive information about where you may purchase a DNR bracelet. Include a self-addressed, stamped envelope for a faster reply.

State of New York
Department of Health

Nonhospital Order Not to Resuscitate
(DNR Order)

Person's Name _____

Date of Birth ___ / ___ / ___

Do not resuscitate the person named above.

Physician's Signature _____

Print Name _____

License Number _____

Date ___ / ___ / ___

It is the responsibility of the physician to determine, at least every 90 days, whether this order continues to be appropriate, and to indicate this by a note in the person's medical chart. The issuance of a new form is NOT required, and under the law this order should be considered valid unless it is known that it has been revoked. This order remains valid and must be followed, even if it has not been reviewed within the 90-day period.