

PRIMARY CARE 10 TOP TIPS

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The Mental Capacity Act 2005 is underpinned by a set of five principles. For more information visit

[justice.gov.uk/protecting-the-vulnerable/mental-capacity-act](https://www.justice.gov.uk/protecting-the-vulnerable/mental-capacity-act)

DNACPR decisions

'Only consider CPR if you anticipate the benefits will outweigh the risks to the patient. Remember to consider the other medical (and non-medical) needs of the patient. In end of life care CPR is not usually the main issue.' Roger Worthington, Yale School of Medicine – Assistant Professor (Adjunct) of Medicine (General Medicine)

1 DNACPR means Do Not Attempt Cardiopulmonary Resuscitation and is a better term than DNAR (Do Not Attempt Resuscitation) because it is more specific and causes less confusion, the latter can be misinterpreted as do nothing.

2 When patients lack capacity, actively involve the family and the patient's legal representative if appointed.

3 Clinical judgement needs to be employed. Is it appropriate to attempt cardiopulmonary resuscitation (CPR)? If it is likely to be futile because the patient is dying from their underlying condition there is no need to offer CPR.

4 We must remember to check for the existence of an Advanced Refusal of Treatment before attempting to resuscitate a patient, otherwise we could be assaulting the patient.

5 The resuscitation conversation should be had with the patients themselves when they have the capacity to decide.

6 Advance Care Planning and Gold Standards Framework help to introduce the conversation early on. Do not introduce the conversation in isolation.

7 The burdens, benefits and risks of attempting CPR must be considered as part of a wider discussion about the patient's condition and needs.

8 DNACPR forms in hospital: how do we know that the decision has been discussed with patient prior to them being discharged home or to a community hospital? We need to check the validity of a previously filled in form.

9 Blanket policies are not an ethical way of dealing with difficult issues around when to attempt CPR eg in nursing homes.

10 The DNACPR decision must be communicated to the primary health care team, out of hours, ambulance service and carers. Interprofessional working is good for healthcare professionals, families, carers and above all the patient.

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