

Clinical Decision Aid: Levels of Medical Treatments & Interventions

CPR C2	<p>GOAL: Cure or control the client's condition.</p> <p>The client is expected to benefit from maximum therapeutic³ effort including attempted CPR, intubation and critical care⁴.</p> <ul style="list-style-type: none"> This designation is not clinically indicated for clients at the natural end of life.
DNACPR C2	<p>GOAL: Cure or control the client's condition.</p> <p>The client is expected to benefit from maximum therapeutic effort including intubation and critical care, excluding CPR.</p> <ul style="list-style-type: none"> This designation is not clinically indicated for clients at the natural end of life.
DNACPR C1	<p>GOAL: Cure or control the client's condition, with limitations.</p> <p>The client is expected to benefit from maximum therapeutic effort including critical care, excluding CPR and intubation.</p> <ul style="list-style-type: none"> This designation is not clinically indicated for clients at the natural end of life.
DNACPR M3	<p>GOAL: Cure or control the client's condition, with limitations.</p> <p>The client is likely to benefit from maximum therapeutic effort excluding CPR, intubation and critical care.</p> <ul style="list-style-type: none"> This designation is not clinically indicated for clients at the natural end of life.
DNACPR M2	<p>GOAL: Cure or control the client's condition within their place of residence.</p> <p>The client is likely to benefit from medical treatments for symptom control⁵ and/or maintenance of function and comfort, excluding CPR, intubation and critical care.</p> <ul style="list-style-type: none"> If a client does not respond to available treatments within their place of residence/location of care, reassess designation. Consider transfer to acute care if comfort needs cannot be met in current location (pain or symptom crisis).
DNA CPR M1	<p>GOAL: Support natural death through care for physical, psychological and spiritual needs.</p> <p>All care is directed at preparation for imminent or expected death with maximum therapeutic effort directed at supportive care, symptom control and comfort measures. Excludes CPR, intubation and critical care.</p> <ul style="list-style-type: none"> Consider transfer to acute care if comfort needs cannot be met in current location (pain or symptom crisis).

³ Maximum therapeutic effort: any appropriate investigations/interventions that can be offered.

⁴ Critical Care admission: consultation required to determine if critical care interventions are clinically indicated; as per FH policy.

⁵ Symptom Control: treatments that relieve discomfort associated with physical, emotional, psychosocial or spiritual concerns; may or may not include disease-modifying therapies.

	CPR	Intubation	Critical Care	Site Transfer	Treat Reversible Conditions	Symptom Control
CPR C2	Yes	Yes	Yes	Yes	Yes	Yes
DNACPR C2	No	Yes	Yes	Yes	Yes	Yes
DNACPR C1	No	No	Yes	Yes	Yes	Yes
DNACPR M3	No	No	No	Yes	Yes	Yes
DNACPR M2	No	No	No	Consider, if required for symptom control	Yes	Yes
DNACPR M1	No	No	No		No	Yes