

*Regulations of Connecticut State Agencies*

TITLE 19a. Public Health and Well-Being

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*Agency*

**Department of Public Health**

*Subject*

**Recognition and Transfer of “Do Not Resuscitate” Orders**

*Inclusive Sections*

**§§ 19a-580d-1—19a-580d-9**

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**Recognition and Transfer of “Do Not Resuscitate” Orders**

**Sec. 19a-580d-1. Definitions**

As used in sections 19a-580d-1 through 19a-580d-9 of the Regulations of Connecticut State Agencies:

(1) “Attending physician” means the Connecticut licensed physician selected by or assigned to a patient, who has primary responsibility for the treatment and care of the patient. Where more than one physician shares such responsibility, any such physician may act as the attending physician.

(2) “Authorized representative” means a person who is otherwise authorized by law to provide consent to the issuance or revocation of a DNR order for an incapable or incompetent patient.

(3) “Department” means the Connecticut Department of Public Health.

(4) “Designated agency” means either a healthcare institution or a physician licensed by the department.

(5) “Do Not Resuscitate order” or “DNR order” means an order written by a Connecticut licensed physician to withhold cardiopulmonary resuscitation, including chest compressions, defibrillation, or breathing or ventilation by any assistive or mechanical means including, but not limited to, mouth-to-mouth, mouth-to-mask, bag-valve mask, endotracheal tube, or ventilator for a particular patient.

(6) “DNR bracelet” means the bracelet approved by the department for the transmission of a ‘Do Not Resuscitate’ order and meeting the requirements of section 19a-580d-4.

(7) “DNR transfer form” means a form approved by the department for the transmission of a ‘Do Not Resuscitate’ order issued by a licensed physician.

(8) “Emergency Medical Services provider” or “EMS Provider” means a person, association, or organization who provides immediate or life saving transportation and medical care away from a hospital to a victim of sudden illness or injury, and who may also provide invalid coach services.

(9) “Healthcare institution” means an institution licensed or regulated under chapter 368v of the Connecticut General Statutes.

(10) “Medical direction” means the provision of medical advice, consultation, instruction and authorization to appropriately trained or certified personnel by designated staff members at sponsor hospitals.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-2. DNR transfer form**

(a) To transmit a DNR order between healthcare institutions or during transport by an EMS provider between healthcare institutions, the DNR order shall be documented on the DNR transfer form.

(b) The DNR transfer form signed by a licensed physician or a registered nurse shall be

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recognized as such and followed by healthcare institutions and EMS providers.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-3. Transfer and recognition of DNR orders when patients are transported**

(a) When a patient who is to be transferred between healthcare institutions has a DNR order which is to remain in effect during and after the transfer, that order shall be documented on a DNR transfer form which is signed by the physician who entered the DNR order or by a registered nurse who attests to the existence of such order. The DNR transfer form or a legible copy shall be sent with the patient when the patient is transferred to another healthcare institution.

(b) The DNR transfer form or a legible copy shall be retained with the patient's medical record.

(c) The DNR transfer form or a legible copy or a DNR bracelet shall be shown to all EMS providers by the healthcare facility staff person who transfers care of the patient to the EMS providers. The EMS provider shall show the DNR transfer form or a legible copy or a DNR bracelet to a nurse or physician at the receiving healthcare institution or, in the absence of a nurse or physician, the person in charge of patient care.

(d) Any healthcare institution receiving a patient with a DNR transfer form, a legible copy, or DNR bracelet shall honor the DNR order until such time as admitting orders are written in accordance with the healthcare institution's policies.

(e) When a patient has a DNR order which is to remain in effect after discharge from a healthcare institution to home, that patient shall be offered a DNR bracelet by the healthcare institution prior to discharge.

(f) Any EMS provider receiving a patient with a DNR transfer form or a legible copy or a DNR bracelet shall honor the DNR order.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-4. DNR bracelets**

(a) A DNR bracelet shall be the only valid indication recognized by EMS providers that a DNR order exists for patients outside a healthcare institution, other than those patients received by an EMS provider directly from a healthcare institution. A valid DNR bracelet shall:

- (1) Be of a design approved by the department,
- (2) be affixed to the patient's wrist or ankle,
- (3) display the patient's name and attending physician's name, and
- (4) not have been cut or broken at any time.

(b) A DNR bracelet shall be recognized and honored by healthcare institutions and EMS providers.

(c) A patient or the patient's authorized representative may obtain a DNR bracelet from any designated agency based on a written order from the patient's attending physician.

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(1) The designated agency shall maintain a permanent record including a copy of the written DNR order.

(2) A designated agency may obtain DNR bracelets and DNR transfer forms from the organization selected by the department to maintain a central supply of such items.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-5. DNR patients under the care of EMS providers**

DNR patients under the care of EMS providers shall be given medical care as determined by consultation with medical direction, recognizing the limitations of the DNR order.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-6. Assistance by attending physicians**

When requested by a patient or his authorized representative the attending physician who issued the DNR order shall:

- (a) Provide the patient with information on how to contact a designated agency, or
- (b) if a patient is unable to obtain a DNR bracelet from any other source, the attending physician shall obtain and provide one.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-7. Revocation**

A DNR order may be revoked by the patient or authorized representative in any of the following ways:

- (a) Removing the bracelet from the patient's extremity, or
- (b) telling an individual licensed healthcare provider or certified emergency medical technician. Such healthcare provider or emergency medical technician shall enter, or cause to be entered, the contents of the statement in the patient's permanent medical record and notify the attending physician and the physician who issued the DNR order.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-8. Provision for patients with certain considerations**

(a) Nothing in these regulations shall be construed to limit the authority of the commissioner of mental retardation under subsection (g) of section 17a-238 of the general statutes concerning orders applied to persons receiving services under the direction of the commissioner of mental retardation.

(Adopted effective December 30, 1996)

**Sec. 19a-580d-9. Ethical, philosophical, religious objections**

(a) Healthcare providers who have an ethical or philosophical, or religious objection to implementing a DNR order shall turn over care of the patient without delay to another provider who will implement the DNR order. Pending the assumption of care by another

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provider, the DNR order shall be followed.

(Adopted effective December 30, 1996)