

**MEHLVILLE FIRE PROTECTION DISTRICT
EMERGENCY MEDICAL SERVICES
GUIDELINES FOR PREHOSPITAL EMERGENCY CARE**

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**SUBJECT: 700.12
CARDIAC EMERGENCIES:
TERMINATION OF CODES**

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Overview:

Clinical experience and clinical studies clearly indicate that the pulseless patients who do not respond to ACLS maneuvers within a short period of time will not survive resuscitation efforts. This policy will outline the framework within which pre-hospital care providers and the attending Medical Direction physician may discontinue resuscitation efforts.

Procedure:

1. Assess ABC's (Airway, Breathing, Circulation).
2. Begin BLS and ACLS procedures as indicated.
 - If there is clear evidence of prolonged "down time", a "no code" or "Do not resuscitate" order, terminal illness, or other indicators that the patient did not desire resuscitative intervention, then resuscitative efforts should be withheld. (See section 1100.10)
 - If any uncertainty exists regarding "code status" or "down time", proceed with resuscitative efforts.
3. Once resuscitative efforts have begun, such efforts will continue for at least twenty minutes.
 - Patients who suffer medical cardiac arrest should be treated at the scene with chest compressions started as quickly as possible. It is preferable to treat the patient at the scene unless there is a safety concern or special circumstances. CPR is not as effective if done while transporting the patient.
 - All trauma arrest cases are excluded from this policy. These patients will undergo continued resuscitation and prompt transport.
4. Apneic, pulseless patients in asystole, pulseless electrical activity or persistent ventricular fibrillation after at least twenty five minutes of ACLS will be considered for termination of resuscitative efforts. Pre-hospital personnel will review the known history and ongoing interventions with the Medical Direction physician. The physician may then direct the paramedic to terminate resuscitation efforts. End tidal CO₂ and waveform capnography should be used during the resuscitative effort and may be used in the decision to terminate the code or continue resuscitative efforts.
5. Once a resuscitation has been started, Medical Control **must be contacted** to terminate it.

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6. After termination of resuscitation, the paramedic will inform the family and/or nursing home personnel that the patient has been declared dead by the Medical Direction physician. Any questions regarding termination will be referred to Medical Direction.
- If law enforcement officials are not present, the local police will be contacted by the paramedic and informed of the death. Medics will remain at the scene until law enforcement officials have arrived at the scene.
 - Pre-hospital personnel may leave the scene once law officials have arrived and appropriate family needs are attended to.

Addendum

Once Medical Control has authorized the *Termination of Code*, District personnel will inform Law Enforcement of the decision so the Medical Examiner's office may be notified. District personnel will clean-up the area and prepare the deceased for viewing by the family. This preparation may necessitate the removal of any IVs and/or Advanced airways; and placing the deceased back into a bed or lounge chair which gives the appearance the deceased is in a position of comfort.

This addendum may be influenced by situations which occur in an "in hospital" setting such as Kindred Hospital or Jefferson Barracks Veteran's Hospital. In these scenarios, the physician on scene will direct the care and termination of code and be responsible for the death notification. Scenes of a suspicious nature will *not* be altered as to not disturb the scene, allowing Law Enforcement to conduct their investigation.

Documentation of all events which have taken place, including the events as they occurred *after* Medical Control authorized the Termination of Code, will be performed before leaving the scene. Should a situation arise where Law Enforcement is not on-scene, a request will be made to have them report to the scene for death notification through the Medical Examiner's office.

STANDARD PRECAUTIONS MUST BE OBSERVED.