Interfacility Protocol

<table>
<thead>
<tr>
<th>Protocol Title:</th>
<th>Death During Transport</th>
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</thead>
<tbody>
<tr>
<td>Original Adoption Date:</td>
<td>05/2009</td>
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<td>Past Protocol Updates:</td>
<td>05/2009</td>
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<td>Date of Most Recent Update:</td>
<td>December 26, 2013</td>
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<td>Medical Director:</td>
<td>Cory Vaudt M.D.</td>
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Purpose:

To provide guidance to ECP’s in the event of patient death during transport.

Note: If a valid In-Hospital DNR exists during transport when an Out of Hospital DNR (OOH DNR) order has not been properly filled out, the In-Hospital DNR is not valid for EMS purposes. However, this document will give transporting staff evidence toward the patient wishes and On-Line Medical Control should be contacted and made aware of the existing DNR order. Refer to the State of Iowa Protocols, appendix G, ‘Discontinuation of Resuscitation’ and appendix B, ‘EMS OOH DNR’ for further guidance.

Procedure:

Hospital to Hospice Patients with Valid In-Hospital DNR Orders

Hospice patients, with a valid “In-Hospital” DNR order, signed by a physician, who expires during transport to a hospice care facility, should be transported to the nearest of either the destination or departure facility.

The receiving facility should be notified if possible, as to the change in patient status, so that needed arrangements can be made.

Facility to Non-Hospice Facility Transport of Patient with a Valid “In-Hospital” DNR Order

If a patient being transported from one facility to another facility should expire during transport with a valid DNR order, signed by a physician, resuscitation effort should be initiated while simultaneously contacting medical control at the receiving facility.
Crew members should inform medical control as to the change in patient condition, the existence of the valid DNR order and follow the recommendations of the On-Line Medical Control Physician or their designee.

Should the On-Line Medical Control Physician request that crew members discontinue efforts, crews should transport to the nearest of either the destination or departure facility.

The receiving facility should be notified if possible, as to the change in patient status, so that needed arrangements can be made.

**PATIENTS WITHOUT VALID DNR ORDERS**

Any patient without a valid DNR order, who progresses to cardiac or respiratory arrest, should have all attempts at resuscitation made; including as appropriate the usage of Medications, Airway and Ventilatory Support and Chest Compressions.

Follow appropriate protocols and divert to and contact the closest appropriate facility.

**Special Care Considerations for DNR Patients**

It is important to note that during these types of transfers, family may be present or close behind. In the event of a death, special care and consideration to family members is crucial.

Important tips to remember when dealing with this include:

- Position the patient properly
- Cover the patient from the neck down
- Keep the upper extremities by the patient’s side
- Elevate the head slightly

Accommodate the emotional needs of the family in a professional manner, answer questions appropriately and honestly.

Be aware that family members may be in unfamiliar territory. Explain the upcoming events as best you can. Explain that:

- The body will be transported to the hospital where a room may be provided
- *If a DNR existed*, it is unlikely that a physician will examine the body
- If they have a funeral home of preference, they will be contacted and would likely transport the body from the hospital
- If for some reason the case were deemed a medical examiners case, the medical examiner may transport the body for autopsy purposes