

Practical policy guidance from the National Center for Ethics in Health Care

May Do-Not-Resuscitate (DNR) Orders Be Suspended for Surgery?

The Ethics Center is often asked whether it is permissible to suspend DNR orders during surgery. There may be circumstances where the temporary suspension of a DNR order is both medically and ethically appropriate. However, before suspending a DNR order the practitioner must get the patient's or surrogate's consent.

Surgical Interventions & DNR Orders

By consenting to a do-not-resuscitate (DNR) order, patients indicate their preference not to receive cardiopulmonary resuscitation and health care personnel must respect those wishes. However, when a patient with a DNR order is scheduled for surgery or other procedure involving anesthesia, questions may arise because interventions associated with anesthesia – such as intubation, mechanical ventilation, and the administration of fluids and vasoactive drugs – might be deemed inappropriate for a patient with a DNR order. This creates a tension between the obligation to respect the patient's decision to forgo certain treatments and the obligation to provide good anesthetic care.

Reconsideration of DNR Orders Prior to Surgery

Patients who have existing DNR orders should always be given the option of having their DNR order temporarily suspended during surgery. The practitioner should explain to the patient or surrogate the risks of cardiopulmonary arrest associated with the procedure and the use of anesthesia and the likelihood that the patient would die or suffer other adverse outcomes if he or she arrests during the procedure and health care personnel withhold cardiopulmonary resuscitation.

If the patient or surrogate agrees to suspension of the DNR order, the practitioner must document the discussion and the agreed upon specifics concerning suspension of the order in the patient's health record, including instructions for how and when the suspended DNR order will be reinstated. Similarly, if the patient or surrogate does not agree to suspension of the DNR order, that decision should be documented. If the practitioner feels he or she cannot in good conscience perform the procedure on a patient who has a DNR order, that practitioner must alert the Chief of Staff and arrange for care of the patient by another practitioner.

Thus, it is permissible to suspend a patient's DNR order for surgery but only after the practitioner has discussed the matter with the patient or surrogate and obtained that person's consent. It is never ethically permissible to automatically suspend DNR orders for surgery. Giving patients the option of having their DNR orders suspended for surgery preserves their right to make decisions consistent with their values and health care goals.

Notes

See VHA Handbook 1004.3, Do Not Resuscitate (DNR) Protocols within the Department of Veterans Affairs.

If you have questions or comments, please contact the Ethics Center at vhaethics@va.gov

