Decision Making About CPR

This is not a choice you need to make on your own. You are encouraged to discuss this decision with your healthcare providers and significant others before the need arises. This decision-making process about CPR can cause emotional distress for the patient, family and loved ones.

It is very important for you to ask about the benefits, risks and likely outcomes of CPR to help you make the best decision.

Your wishes can be communicated verbally or in writing through an Advance Directive or Living Will document (Advance Directive pamphlets are available on the nursing units).

If you don't want CPR, it is important to make your wishes known to your family members, doctor and nurse.

Should you choose not to have CPR, you will continue to receive appropriate medical care.

If your wishes are unknown and the benefits of CPR are unclear, the medical team will start CPR.

If resuscitation is clearly not going to be beneficial, your physician may not offer CPR.



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Milton District Hospital

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Oakville Trafalgar Memorial Hospital

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Georgetown Hospital Milton District Hospital Oakville Trafalgar Memorial Hospital

CardioPulmonary Resuscitation (CPR)



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CPR may include:

working.

Chest compression, artificial respiration, intubation (breathing tube), ventilation (breathing machine), defibrillation (electric shock to heart) and medications.

What is involved in the procedure?

During CPR, the chest is repeatedly pressed on forcefully, electric shock may be applied to the heart, a tube is inserted through the throat into the lungs and medications are used, all in an attempt to revive the heart. CPR is usually done for 10 minutes or longer before stopping all efforts to revive the heart. If the heart is revived, the throat tube may be connected to a breathing machine to assist in breathing.



About CPR

CPR may extend life in people who have a healthy heart and lungs. It may make a difference if CPR is done within minutes of when the person's heart or breathing stops (cardiac arrest).

Some people benefit from CPR, but others do not. In many situations, CPR is un-successful and also inappropriate because it only increases pain and suffering, and prolongs dying.

It is extremely rare for someone to survive a cardiac arrest if no one is with them when it happens. Even with someone present, the survival rates are extremely low.

If resuscitation is "successful", the person may or may not return to their state of health prior to CPR.

Even though a person's heartbeat may return, they may not be able to breathe on their own and, therefore, require the support of a breathing machine.

About CPR (Cont'd.)

The complications of CPR may include physical injury such as a fractured breastbone and ribs, with significant bruising and pain.

If CPR is prolonged, brain damage may result causing problems understanding, personality change or coma.

