

SIGNS/SYMPTOMS: An unresponsive patient found without respirations and without a palpable carotid pulse i.e., clinically dead.

Assessment

Inclusion/Exclusion Criteria:

Resuscitation should be started on all patients who are found apneic and pulseless unless the following conditions exist (does not apply to victims of lightning strikes, drowning, or hypothermia):

1. Medical cause or traumatic injury or body condition clearly indicating biological death (irreversible brain death), limited to:
 - a. Decapitation: the complete severing of the head from the remainder of the patient's body.
 - b. Pooling of blood and/or mottled skin.
 - c. Decomposition or putrefaction: the skin is bloated or ruptured, with or without soft tissue sloughed off. The presence of at least one of these signs indicated death occurred at least 24 hours previously.
 - d. Transection of the torso: the body is completely cut across below the shoulders and above the hips through all major organs and vessels. The spinal column may or may not be severed.
 - e. Incineration: 90% of body surface area with full thickness burns as exhibited by ash rather than clothing and complete absence of body hair with charred skin.
 - f. Injuries incompatible with life (such as massive crush injury, complete exsanguination, severe displacement of brain matter).
 - g. Futile and inhuman attempts as determined by agency policy or protocol related to "compelling reasons" for withholding resuscitation.
 - h. In blunt and penetrating trauma, if the patient is apneic, pulseless, and without other signs of life upon EMS arrival including, but not limited to spontaneous movement, ECG activity, or pupillary response.
 - i. Nontraumatic arrest with obvious signs of death including dependent lividity or rigor mortis.

OR

2. A valid DNR order (form, card, bracelet) or other actionable POLST/MOLST form (physician's or medical order for life-sustaining treatment form) is present and:
 - a. Conforms to the state specifications for color and construction.
 - b. Is intact: it has not been cut, broken or shows signs of being repaired.
 - c. Displays the patient's name and the physician's name.

Treatment and Interventions

1. If all components above are confirmed, no CPR is required.
2. If CPR has been initiated but all components above have been subsequently confirmed, CPR may be discontinued, and on-line medical control contacted as needed.
3. Clinical death is not confirmed if any of the findings are different than those described above. Resuscitative measures should be immediately initiated or continued.
4. Do Not Resuscitate order (DNR/MOLST/POLST) with signs of life:
 - a. If there is a DNR Bracelet or DNR transfer form and there are signs of life (pulse and respirations), provide standard appropriate treatment under

- existing protocols matching the patient's condition.
- b. To request permission to withhold treatment under these conditions for any reason, obtain orders from on-line medical control.
 - c. If there is documentation of a Do Not Intubate (DNI/MOLST/POLST) advanced directive, the patient should receive full treatment per protocols with the exception of any intervention specifically prohibited in the patient's advanced directive.
 - d. If for any reason an intervention that is prohibited by an advanced directive is being considered, obtain orders from on-line medical control.
5. For scene safety and/or family wishes, provider may decide to implement CPR even if all the criteria for death are met.