Half a century after the introduction of CPR (cardiopulmonary resuscitation), advance decisions to withhold CPR remain problematic. Previous research has identified inconsistent decision-making by doctors who largely receive no formal teaching in how to approach this decision – a decision about a treatment that has poor outcomes for many patient groups.

This presentation is based on research undertaken as part of a PhD study that investigated how decisions are currently made about CPR. In this qualitative research, a total of 33 senior doctors, junior doctors, and nurses were interviewed about the CPR decision-making process, the issues arising, dealing with disagreement, and the experience of performing CPR.

The interview transcripts were analysed thematically to identify ethically significant elements within the decision, to which normative ethical principles could be applied, in order to develop and describe an ethical approach to CPR decision-making.

This approach recognises the separate technical and ethical elements of the CPR decision. It also identifies the ethical significance of the CPR discussion and that it is in the process of the discussion that many of the difficulties inherent in the decision can be resolved to achieve consensus. Four clinical patient groups have been identified, each requiring a different purpose for the discussion. Identifying the aim of each discussion facilitates a more specific patient-focused discussion.

This research demonstrates that it is possible to achieve a consistent approach to ethical CPR decision-making. This is an approach that could be taught to doctors and nurses.