DOCUMENTATION OF DO NOT ATTEMPT CARDIOPULMONARY RESUSCITATION (DNACPR) ORDERS – DO ELECTRONIC DNACPR ORDER (EDNACPR) FORMS MAKE A CLINICAL DIFFERENCE OVER STANDARDISED PAPER DNACPR ORDER (SDNACPR) FORMS?

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DNACPR orders are important in sparing patients from inappropriate resuscitation attempts. Accurate documentation of a DNACPR order is required to ensure the decision is clear and understood by those involved. The clarity of documentation is central to NHS Trust guidelines, which suggest specific aspects of the decision need recording.

To determine whether the introduction of eDNACPR forms improve documentation when compared to the standard practice of sDNACPR forms.

A retrospective service evaluation of DNACPR documentation 2 months prior to and 2 months after the introduction of eDNACPR forms (July - November 2011). Subjects were in-patients on the 4 main geriatric/general medicine wards of Queen Elizabeth Hospital Birmingham, Foundation Trust. Documented aspects of the decision were examined and compliance with Trust guidelines assessed.

200 DNACPR orders were documented: 99 sDNACPR forms and 101 eDNACPR forms. Demographics (sex, ethnicity and mean age) were comparable between patients in each documentation method. 31% of sDNACPR forms and 5% of eDNACPR forms proved non-compliant with Trust guidelines.

Analysis of the sDNACPR forms revealed 12% of relatives and 15% of patients were not informed of the DNACPR decision.

eDNACPR forms showed 82% of relatives and 91% of patients were not informed.

eDNACPR forms improve the compliance of DNACPR order documentation with Trust guidelines. However, fewer DNACPR decisions are discussed with patients and relatives. eDNACPR forms do not process until all fields are completed. Therefore some reasons for sDNACPR form non-compliance, e.g. no review date stated, were removed through the design of eDNACPR forms.