

OREGON STATE HOSPITAL

POLICY

SECTION 6: Patient Care **POLICY: 6.012**

SUBJECT: Code Status

POINT PERSON: Chief of Medicine

APPROVED: Sara Walker, MD

DATE: JULY 25, 2024


Interim Superintendent

SELECT ONE: ☐ New policy ☐ Minor/technical revision of existing policy
☒ Reaffirmation of existing policy ☐ Major revision of existing policy

I. PURPOSE AND APPLICABILITY

- A. Oregon State Hospital (OSH) will support a patient's expressed code status, when known, during a medical emergency. When a patient's code status preferences are known and delineated in a valid advance directive or Physician's Orders for Life-Sustaining Treatment (POLST), staff must follow the patient's preferences. An advance directive is considered valid if it meets applicable provisions in Oregon Revised Statute (ORS) 127.505 – 127.760. A POLST is considered valid when it meets provisions of ORS 127.663 – 127.684.
- B. This policy applies to all staff able to respond to code events.

II. POLICY

- A. If a patient is full code or if their code status is unknown and they experience cardiac or respiratory arrest, staff must initiate all necessary emergency procedures in accordance with OSH Policy 8.038, "Code Blue Medical Emergency". All efforts should be made to resuscitate the patient until a physician or nurse practitioner determines there is reasonable undue degree of medical certainty that continued administration of cardiopulmonary resuscitation (CPR) is no longer expected to restore cardiac or respiratory function to the patient.
- B. If a patient's code status is "Do Not Resuscitate" (DNR)/"Do Not Attempt Resuscitation" (DNAR), staff may not attempt to resuscitate the patient.
- C. The patient or legally-appointed health care representative may at any time change the patient's code status in accordance with applicable provisions of ORS 127.505 – 127.760.

- D. Health care personnel may not permit personal beliefs to obstruct the implementation of a patient's or health care representative's preferences regarding code status.
- E. Each patient's orders must reflect the patient's advance directives or POLST:
 - 1. Code: Full or DNR/DNAR
 - 2. POLST: Yes or No
 - 3. Advance Directive: Yes or No
- F. A patient's advance directive or POLST reflecting their code status must be filed in the Legal section of the medical record.
- G. OSH follows all applicable regulations, including federal and state statutes and rules; Oregon Department of Administrative Services (DAS), Shared Services, and Oregon Health Authority (OHA) policies; and relevant accreditation standards. Such regulations supersede the provisions of this policy unless this policy is more restrictive.
- H. Staff who fail to comply with this policy or related policy attachments or protocols may be subject to disciplinary action, up to and including dismissal.

III. DEFINITIONS

- A. "Code status" in this policy means a patient's requested level of medical intervention for cardiac or respiratory arrest as expressed in a valid advance directive or POLST.
- B. "Health care representative" has the same meaning as the definition in ORS 127.505.
- C. "POLST" has the same meaning as the term in ORS 127.663.
- D. "Staff" includes employees, volunteers, trainees, interns, contractors, vendors, and other state employees assigned to work at Oregon State Hospital (OSH).

IV. RELATED OSH POLICIES AND PROTOCOLS

6.025 Advance directives

8.038 Code blue medical emergency

V. REFERENCES

42 CFR § 482.13(b)(2).

42 CFR § 482.13(b)(3).

42 CFR § 489.100 – 489.104.

Oregon Administrative Rule §§ 333-270-0010 – 333-270-0080.

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Oregon Administrative Rule § 847-010-0110.

Oregon Revised Statute §§ 127.505 – 127.649.

Oregon Revised Statute §§ 127.700 – 127.737.

Oregon Revised Statute § 677.265.

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