CPR Decision Aid

What is CPR and when is it needed?
CPR stands for cardio-pulmonary resuscitation and it is used to try and restart a person’s heart when it has stopped beating. It is standard practice for health care workers to do CPR unless the person has a written record saying that they do not want CPR done if their heart stops.

How is CPR done?
There are many things that can be done during CPR such as:

- Pushing down on the chest about 2 – 2 ½ inches, many times each minute to make the heart pump blood.
- Giving an electrical shock through the chest to make the heart beat normally again.
- Giving drugs to help the heart start beating again.
- Putting a mask on your face, or a tube in your windpipe to help you to breathe.

How can CPR cause harm?
- Many people have broken ribs or breastbone after CPR. There may also be bruising on the chest.
- There could be burns on the chest from the electrical shocks.
- More than half of people who recover from CPR will have some brain damage that could be long-lasting.
- It is possible to vomit during CPR. If this gets into the lungs it can cause pneumonia.

Who is most likely to be helped by CPR?
- People who were healthy & active before their heart stopped.
- People who have CPR started within a few seconds of their heart stopping.
- People who have a type of heartbeat that is helped by electrical shock.

Who is least likely to be helped by CPR?
- People who have an illness they will not recover from (also called a terminal illness) like advanced cancer.
- People who are severely ill with heart, lung, liver, or kidney failure.
- People who are very weak, frail, or older.
What happens if I decide not to have CPR?

- If you decide not to have CPR if your heart stops, you can still get other treatments like surgery and pain medicines.

What are my chances of surviving if I have CPR?

- Whether you are in the hospital or outside of the hospital when your heart stops beating affects your chances of survival.
- In the hospital, your chance of surviving after CPR is 50%. Surviving to be discharged from the hospital with good neurological (brain) outcomes is 8-14%.
- Outside of the hospital, your chance of surviving after CPR is 23%. Surviving to be discharged from the hospital with good neurological (brain) outcomes is 3%.

(Statistics from: University of Arizona, Arizona Center on Aging, Elder Care, 2015)

Think about your goals when deciding whether you would want to have CPR if your heart stopped beating.

<table>
<thead>
<tr>
<th>CPR is appropriate</th>
<th>CPR is not appropriate</th>
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</thead>
<tbody>
<tr>
<td>o Living a long life is a goal, no matter if you are healthy</td>
<td>o Living a long life is not a goal</td>
</tr>
<tr>
<td>o Dying peacefully isn’t a goal</td>
<td>o Dying peacefully or naturally is a goal</td>
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<tr>
<td>o Avoiding a drawn-out death isn’t a goal</td>
<td>o Avoiding a drawn-out death is a goal</td>
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<tr>
<td>o Being comfortable isn’t a goal</td>
<td>o Being comfortable is a goal</td>
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<tr>
<td>o You have a high tolerance to pain</td>
<td>o Having a low tolerance to pain</td>
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<tr>
<td>o You are willing to risk having a bad outcome (e.g. some degree of brain damage) from CPR</td>
<td>o You are not willing to risk having a bad outcome (e.g. some degree of brain damage) from CPR</td>
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</tbody>
</table>

(Adapted from: The University of Arizona, Arizona Center on Aging, Elder Care, 2015)

For more information talk to your doctor, or if you are a patient in the hospital, contact the BCH Palliative Care team at 303-415-7358.