

**LAKE COUNTY BOARD OF DD/DEEPWOOD**

**BOARD POLICY**

Reviewed and Adopted by the Board:  
Date: October 18, 2021

Signature on File  
Elfriede Roman, Superintendent

**I. SUBJECT: EMERGENCY MEDICAL TREATMENT/INTERVENTION & DO NOT RESUSCITATE ("DNR") ORDERS**

**II. PURPOSE:**

To establish a uniform Agency response to situations requiring emergency medical treatment and/or intervention.

**III. REFERENCES:**

42 CFR § 483.460 Conditions of Participation: Health Care Services  
Ohio Revised Code § 3313.712 Emergency Medical Authorization  
Ohio Revised Code § 1337 *et seq.* Durable Power of Attorney for Health Care  
Ohio Revised Code § 2133 *et seq.* Modified Uniform Rights of the Terminally Ill  
Ohio Administrative Code 3701-62 *et seq.* "Do Not Resuscitate" (DNR) Orders; Immunity of Medical Professionals; Revocation of Order  
LCBDD/Deepwood Policy H-2 Emergency Medical Treatment Authorization (EMTA) and Authorization to Administer Medication

**IV. POLICY:**

- A. Emergency Medical Treatment  
In the event of the occurrence of circumstances requiring emergency medical treatment and/or intervention, Agency staff shall summon the appropriate emergency medical personnel (Agency Nursing Staff, if available, Emergency Medical Assistance "911" Service) and, as may be directed by such emergency medical personnel, facilitate the transfer of the individual(s) to a primary health care facility. The agency and its staff will administer emergency treatment, including life-sustaining treatment in the absence of a properly documented DNR protocol.

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**B. DNR Protocol**

If an individual/guardian elects to implement a DNR order, the following must occur:

- 1) Any staff member who becomes aware of an individual with a DNR will notify the shift/habilitation manager who will notify the Director of Nursing.
- 2) Do-Not-Resuscitate protocol will be in accordance with Ohio Department of Health DNR Protocol (as authorized by Chapter 119 of the Revised Code for the administration of sections 2133.21 to 2133.26 of the Revised Code). Approved identification (as attached) is required for activation of DNR Order.
- 3) Individuals must provide a DNR Identification Form, [OAC Appendix B, (Attachment B)], which will then be attached to the Board EMTA form.
- 4) Additional forms of DNR notification as provided for by State of Ohio DNR protocol may be used by the individual (Attachment C in addition to Attachment B).
- 5) Board staff will be in-serviced on DNR protocol as needed by program manager.

**C.** Information related to DNR status shall be treated as protected health information and be secured and disclosed in accordance with the Health Insurance Portability Act of 1996.

**V. DISTRIBUTION:**

All Board Members  
All Management Staff  
All Staff (via Department Managers)  
LEADD President

**VI. REVIEWED:**

10/21, 10/19, 10/18, 10/17, 10/16, 10/15, 10/14, 10/13, 10/11, 10/09, 09/07, 09/05, 05/03, 05/02, 03/00, 09/99, 08/94