

April 24, 2003

Vanessa R. Bishop, LCSW-C
2055 North Vermont Street, Suite 401
Arlington, VA 22207

Dear Ms. Bishop:

I am writing in response to your letter of April 2, 2003, concerning the outpatient “do not resuscitate” order form that has been adopted by the Maryland Institute for Emergency Medical Services Systems, referred to in your letter as the “MIEMSS form.” Your questions and my responses are set forth below.

1. “Can the MIEMSS form be implemented as a permanent code status form in a long-term care facility or should an in-house form be created in addition to the MIEMSS form?”

Health care facilities are authorized by the Health Care Decisions Act to use the MIEMSS form as their in-house DNR order form. § 5-608(a)(3) of the Health-General Article, Maryland Code. Even if a facility uses its own form routinely, it may rely on the MIEMSS form temporarily, until the in-house form can be completed.

2. “Can the MIEMSS form when once completed, designate one’s entire medical course of treatment, [for example,] whether one receives skilled physical or occupational therapy if he/she has chosen palliative on their MIEMSS form?”

The MIEMSS form is *not* a description of a complete plan of care. Rather, it is a physician’s order limited to the circumstances surrounding a cardiopulmonary arrest. Coupled with the protocols that elaborate on the terms of the order itself, the MIEMSS form indicates whether aggressive efforts are to be made to forestall an arrest and directs that comfort care measures be provided in accordance with the order. The MIEMSS form should not be understood to address the use of therapeutic interventions outside this context.

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3. "If a new admission brings a completed MIEMSS form from another facility, can the DNR status be implemented immediately without the doctor's orders from the new attending physician?"

Yes. Under § 5-608(a)(3) of the Health-General Article, the MIEMSS form is portable and may be honored by the new facility.

4. "Does choosing palliative care on the MIEMSS form preclude a resident/patient from being transferred to a hospital?"

No. As discussed in answer to your second question, the MIEMSS form is not a comprehensive plan of care. One can envision many situations in which hospital care is medically appropriate for a patient who has chosen DNR status via the MIEMSS form.

5. "What is the scope of the MIEMSS form?"

As discussed in answer to your second question, the scope of the MIEMSS form is limited to the interventions associated with cardiopulmonary arrest (impending or actual). The MIEMSS form should not be construed as addressing anything else.

I hope that this letter of advice has responded fully to your questions. Please let me know if I may be of further assistance.

Very truly yours,

Jack Schwartz
Assistant Attorney General
Director, Health Policy Development