Code Statuses at INTEGRIS Health

Refer to policy SYS-PCS-ETH-403.

INTEGRIS HEALTH

	CPR/ACLS	Intubation pre-arrest	Intubation at time of arrest
Full Code	yes	yes	yes
DNR	no	yes	no
DNI	yes	no	no
DNI/DNR	no	no	no

Do Not Resuscitate

Provide all medically indicated, life-sustaining interventions, **including intubation**, up to the point of cardiac arrest.

At the point of cardiac or respiratory arrest, no resuscitative interventions will be attempted.

Full Code

At the point of cardiac or respiratory arrest, all medically indicated, resuscitative interventions will be attempted.

Do Not Intubate · Do Not Resuscitate

Provide all medically-indicated, life-sustaining interventions, **excluding intubation**, up to the point of cardiac or respiratory arrest.

At the point of cardiac or respiratory arrest, no resuscitative interventions will be attempted.

Do Not Intubate

Provide all medically indicated, life-sustaining interventions, **excluding intubation**, up to the point of cardiac or respiratory arrest.

At the point of cardiac or respiratory arrest, all medically-indicated, resuscitative interventions, **excluding intubation,** will be attempted.

New Code Statuses FAQ

We can intubate a DNR patient?

A: Yes. Oklahoma statutory **Do Not Resuscitate** language states it is applicable **only** to the moment our patient's heart or breathing stops. If breathing hasn't stopped, but is in distress, intubation can be used. These code statuses keep us in compliance with the law.

What about lethal rhythms?

A: Does the patient have a pulse?
- If yes, we treat, because their heart hasn't arrested.
- If no (the heart has arrested), follow the patient-requested code status.

Do we need different forms for DNI or DNI/DNR?

A valid state DNR form translates exactly to our DNR code status. DNI is an in-hospital plan of care decision based upon the patient's goals. No form is required. The state DNR consent (yellow) or order (green) forms are required by policy to go with any DNR.

My patient has a DNR on file. What should I do?

Discuss with your patient his or her wishes if breathing worsens, and physicians think breathing tube might be required so a machine can breathe for them. Always document their answers, and explain the new code statuses so they can pick the best one to suit their wishes.

Where can I document all this good conversation?

A: There's an ACP Navigator for that! Click your patient's code status in the storyboard. See the word **Decisions** on the left? Click it to record your patient's wishes regarding codes and intubation. You'll see we've even provided standardized language for you, so you have an easy way to ask the same questions we should all ask.