ATRIUM HEALTH: ACCESSING ADVANCE DIRECTIVES & CODE STATUS IN EPIC



OBJECTIVES

Epic Overview
 Code Status
 Viewing ACP Documentation

E Hyperspace - ZZ PPI 02 FAMILY MEDICI	NE - PLY - TONY-RESMD M. 🔟 🗸 — 🗇	×
Epic - 🛗 Schedule 🚦 Patient	Lists 🔤 In Basket 🕦 Patient Station 📙 Chart 🏢 UpToDate 🕌 Appts 🐛 Telephone Call 🔋 Posted Charges Summary 📾 Links 🛗 OR Schedule 🦿 Remind Me 🗮 ED Track Board 🦉 Culture Vision 🖉 RL6 Handwashing 🖀 AUTH RPT 💦 🤌 🍎 🖨 Print - 🔂 Log	
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EH @	Chart Review Results Synopsis Intake/Output Problems History Notes Rounding Orders Update Home Me Communications Sedation N Stroke Nav PROC Admission Transfer Discharge Procedure Consult Advan) P
Eli-Gl Hector	Overview ICO Aduit Labs (Since Admission) Vitais Wt Rad Micro ICO Assess Aduit Meds & Allergies ID Exposure CAR Snapshot Event Log Intake/Output Plan of Care Int un CO Verview COVErview COVErview CAR Snapshot Event Log Intake/Output Plan of Care	
Male, 60 y.o., 3/8/1963 MRN: 6161510 Bed: NONE Code: Full Code (no ACP docs) Location Phone: 336-716-3636 Service: Emergency Medicine	CDI Provider Query Comment Flow heet Row Patient Privacy Code Word Most Recent Value —	Î
Search		
CSN: 60000406427 Unit Collect Blood: No		
COVID-19 Vaccine: Unknown Required Isolations: None	Most Recent CDI DRG Information There are no CDI reviews on this account.	
No attending provider	Open Handoff Sidebar Sepsis Report Burn Unit Sepsis Blood Availability / Transfusion Info Encounter Events	
Allergies: No Known Allergies		
Primary Ins.: None PCP: None	 O Travel Screening a No screening recorded since 03/07/23 0727 	
CrCl: None	つ Travel History Travel since 02/08/23	
Social Determinants:	No documented travel since 02/08/23 ③ Before Discharge	
	Last Updated: 1427 Refresh	
x w w w	U Not Completed (3) Image: Completed (1) I Admission Order Entered Image: Patient Education Documented	
	A 2. Expected Discharge Date AVS Given To Patient	
ADMITTED: TODAY Patient Class: Emergency Upper GI bleed	Fending Notifications (From admission, onward)	
Ht: 180.3 cm (5' 10.98")	None	
Last Wt: 86.2 kg (190 lb) BMI: 26.51 kg/m ² ! BSA: 2.08 m ²	Wital Signs a Report Image: Intake/Output a Im	
NEW RESULTS (LAST 36H)	03/07 0700 03/08 0700 3/6 3/7 3/8 Switch View 03/08 0659 03/08 1427 Most Recent 0701 0701 0701 EMOGLOBIN EMATOCRIT WBC PLATELET COUNT	 ~

CODE STATUS DISPLAY IN EPIC

 Active code status is displayed under the patient's name in StoryBoard:



• Unclarified code status may have this label:

Code: Needs Code Status (See History) (no ACP docs)

VIEWING CODE STATUS HISTORY

 Code status history can be viewed by clicking the code status label

Current	Code	Status
Full Code	- Set by	

Code Status History								
Date Active	Date Inactive	Code Status						
8/19/2021 0828	8/19/2021 1500	Full Code						
8/17/2021 2002	8/19/2021 0828	DNR / Full SOTO						
8/14/2021 2249	8/17/2021 2002	Full Code						
7/31/2021 1017	8/14/2021 2249	Full Code						
7/29/2021 1351	7/31/2021 1017	Full Code						

*Code status change from DNR to Full Code may or may not be intentional.

**Multiple fluctuations between DNR and Full Code in a patient's code status history strongly indicates a need for clarification.

VIEWING ACP DOCUMENTATION

- If code status lists "has ACP docs" ACP documents will display below code status history, hyperlinks lead to scanned documents
- Specifically tagged ACP
 notes will display below
 ACP Documents

Advance Care Planning Documents

Documents without received dates are displayed at the bottom

T ff - ations

Document Type	Status	Date
Power of Attorney	Received	
Advance Directives and Living Will	Received	
Power of Attorney	Received	
Advance Directives and Living Will	Received	
Power of Attorney	Received	
Advance Directives and Living Will	Received	

HOW DO I **ENTER OR CHANGE A CODE STATUS** IN EPIC?



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🚹 🗰 👯 🕐 🔨 Hecto	r, Eli-Gl ×		PLY TONY-RESMD M. EpicCare
EH	← → Summary Chart Review Results Synopsis Intak Orders	e/Output Problems History Notes Rounding Orders Update Comm Sedati Stroke Nav PROC Admission 💌 💌	 Sidebar Sum PROC PROC Orders • X
	Active Signed & Held Home Meds Future Outp	tient Orders Cosign Order Hx (Review) MAR Hold Meds Dosing Wt / Core Meas / Phleb Sched	Manage Orders Order Sets Options •
Eli-Gl Hector	Sort by: Order Type V Go to: Expiring Medications		R Change Cosigner 📎 Dx Association
Male, 60 y.o., 3/8/1963 📇 MRN: 6161510			code status + New 9 Next
Bed: NONE Code: Full Code (no ACP docs) Location Phone: 336-716-3636 Service: Emergency Medicine	pantoprazole (PROTONIX) 0.32 mg/mL in sodium chloride 0.9 % 250 mL infusion	8 mg/hr (25 mL/hr), Intravenous, Continuous, Starting on Wed 3/8/23 at 0840, For 1 day WFBMC LMR: A, B1, B2, C, D; LMC/WRMC LMR: Low Expires in 18 hours 13 minutes	
₽ Search	Scheduled		
CSN: 60000406427 Unit Collect Blood: No	0.9% NaCl bolus	1,000 mL Once, Intravenous, Administer over 30 Minutes, On Wed 3/8/23 at 0710, For 1 dose	
COVID-19 Vaccine: Unknown Required Isolations: None	ondansetron (ZOFRAN) injection 4 mg	4 mg Once, Intravenous, On Wed 3/8/23 at 0755, For 1 dose	
No attending provider	pantoprazole (PROTONIX) injection 80 mg	80 mg Once, Intravenous, On Wed 3/8/23 at 0740, For 1 dose	
Allergies: No known Allergies	Continuous		
Primary Ins.: None PCP: None	dextrose 5 % and 0.9 % NaCl infusion	at 100 mL/hr, Intravenous, Continuous, Starting on Wed 3/8/23 at 0740 Modify Discontinue	
CrCl: None	Code Status		
	Full Code / Full Scope of Treatment	Continuous, Starting on Wed 3/8/23 at 1427, Until Specified Discontinue	No Orders
Social Determinants:	Lab		
n 10 m 14 11 11 11 11 11 11 11 11 11 11 11 11	CBC and differential	STAT, On Wed 3/8/23 at 0710, For 1 occurrence Specimen Types - Blood;, New collection	
	Respiratory		
w Ш	Oxygen Therapy	Continuous, Starting on Tue 3/7/23 at 2000, Until Specified Modify Discontinue	
ADMITTED: TODAY Patient Class: Emergency Upper GI bleed		Nasal Cannula Liters per Minute: 2 lpm FiO2%: 100% 92%	
Ht: 180.3 cm (5' 10.98") Last Wt: 86.2 kg (190 lb) BMI: 26.51 kg/m² !			
BSA: 2.08 m ² NEW RESULTS (LA∵ 36H)			× <u>R</u> emove All ☆ Sa <u>v</u> e Work ◇ Sign & <u>H</u> old

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	Summary Chart Review Results Synopsis Intake	/Output Problems History Notes Rounding Orders Update Comm Sedati Stroke Nav	PROC Admission	•	Sidebar Sum PROC PROC .	. Orders 👻	•
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Eli-GI Hector	Active Signed & Held Home Meds Future Outpa	tient Orders Cosign Order Hx (Review) MAR Hold Meds Dosing Wt / Core Meas / Phleb Sche	d		8 Change Cosigner @ Dx A	sociation	
Male, 60 y.o., 3/8/1963 📛	Sort by: Order Type 🔽 Go to: Expiring Medications 🗸			Ð	code status		
MRN: 6161510 Bed: NONE	Expiring Medications					- Ne <u>w</u>	<u>I</u> cxt
Code: Full Code (no ACP docs) Location Phone: 336-716-3636 Service: Emergency Medicine	pantoprazole (PROTONIX) 0.32 mg/mL in sodium chloride 0.9 % 250 mL infusion	8 mg/hr (25 mL/hr), Intravenous, Continuous, Starting on Wed 3/8/23 at 0840, For 1 day WFBMC LMR: A, B1, B2, C, D; LMC/WRMC LMR: Low Expires in 18 hours 13 minutes	Reorder Let Expire Modify	Discontinue			
	Scheduled						
CSN: 60000406427 Unit Collect Blood: No	0.9% NaCl bolus	1,000 mL Once, Intravenous, Administer over 30 Minutes, On Wed 3/8/23 at 0710, For 1 dose Complete					
COVID-19 Vaccine: Unknown Required Isolations: None	ondansetron (ZOFRAN) injection 4 mg	4 mg Once, Intravenous, On Wed 3/8/23 at 0755, For 1 dose Complete		Reorder			
No attending provider	pantoprazole (PROTONIX) injection 80 mg	80 mg Once, Intravenous, On Wed 3/8/23 at 0740, For 1 dose Complete		Reorder			
Allergies: No Known Allergies	Continuous						
Primary Ins.: None PCP: None	dextrose 5 % and 0.9 % NaCl infusion	at 100 mL/hr, Intravenous, Continuous, Starting on Wed 3/8/23 at 0740	Modify	Discontinue			
CrCl: None	Code Status						
<u>د</u>	Full Code / Full Scope of Treatment	Continuous, Starting on Wed 3/8/23 at 1427, Until Specified	Modify	Discontinue	No Or	ders	
	Lab						
	CBC and differential	STAT, On Wed 3/8/23 at 0710, For 1 occurrence Specimen Types - Blood;, New collection	Modify	Discontinue			
	Respiratory						
	Oxygen Therapy	Continuous, Starting on Tue 3/7/23 at 2000. Until Specified	Modify	Discontinue			
ADMITTED: TODAY Patient Class: Emergency Upper Gl bleed		Nasal Cannula Liters per Minute: 2 lpm FiO2%: 100% 92%					
Ht: 180.3 cm (5' 10.98")							
BMI: 26.51 kg/m ² !							
BSA: 2.08 m ²					🗙 <u>R</u> emove All 🛛 🖄 Sa <u>v</u> e Wo	rk 🖉 🖉	lian
NEW RESULTS (LAST 36H)					🖓 Sign & <u>H</u> o	Id 🗸 🗸 🗅	sign

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h 🖮 👯 🕐 🏋 Hecto	or, Eli-Gl								PLY	TONY-RESMD	M. Epic	
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	CODE STAT	TUS Contraction of the second s	Q						ence List <u>Facility List D</u> atabase	ler Sets		intions *
Eli-Gl Hector	🗏 Order	Sets, Panels, & Pathways (No results found)										
Male, 60 y.o., 3/8/1963 💾	🔓 After \	/isit Medications (No results found)									Ne <u>w</u>	
Bed: NONE	🟠 After \	/isit Procedures 🛸							<u></u> (Alt+Shift+3)			
Location Phone: 336-716-3636		Name			Туре	Pref List	Cost to Org					
Service: Emergency Medicine	Δ	DNR, With Other Instructions (aka CODE STATUS)			Code Status	AMB FACILITY P	ROCED	COD7				
	ĥ				Code Status	AMB FACILITY P		COD2				
CSN: 60000406427 Unit Collect Blood: No		Portable DNR (aka OUTPATIENT CODE STATUS)			Code Status	AMB FACILITY P		COD10				
COVID-19 Vaccine: Unknown Required Isolations: None	🗗 During	Visit Medications (No results found)										
No attending provider	🖻 During	J Visit Procedures 🛸							<u>∓</u> (Alt+Shift+5)			
Allergies: No Known Allergies		Name		Туре	Cost t	Org	Px Code		Pref List			
Primary Ins : None	2	CODE STATUS - ADULT					O10835		WH IP FACILITY PATIENT			
PCP: None	2	CODE STATUS - PEDIATRIC					O11927		WH IP FACILITY PATIENT			
CrCl: None		FULL CODE (aka CODE STATUS)		Code Stati	JS		COD2		WH IP FACILITY PATIENT			
Social Determinants:												

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ADMITTED: TODAY Patient Class: Emergency Upper GI bleed

Ht: 180.3 cm (5' 10.98") Last Wt: 86.2 kg (190 lb) BMI: 26.51 kg/m² ! BSA: 2.08 m²

Select And Stay 🖌 <u>A</u>ccept X <u>C</u>ancel

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EH @	Summary Chart Review Results Synopsis Orders	Intake/Output Problems History Notes Rounding Orders Update Comm Sedati Stroke Nav PROC Admission	• • • • • • • • • • • • • • • • • • •	Sidebar Sum PROC PROC Orders *
	Active Signed & Held Home Meds Future	Outpatient Orders Cosign Order Hx (Review) MAR Hold Meds Dosing Wt / Core Meas / Phleb Sched		
Eli-GI Hector Male, 60 y.o., 3/8/1963 👑	Sort by: Order Type 🔽 Go to: Expiring Medication	15 🗸	C	R Change Cosigner O Dx Association
MRN: 6161510 Bed: NONE	Expiring Medications	Code Status - Adult	<mark>✓ A</mark> ccept	🛱 New Orders
Location Phone: 336-716-3636 Service: Emergency Medicine	chloride 0.9 % 250 mL infusion	 See POLICY: Do Not Resuscitate (DNR) and Scope of Treatment Order (SOTO) * Explanation of adult code status selections 		Code Status - Adult
O Search	Scheduled	 * Is a 2nd physician confirmation of diagnosis required? * Decision-maker priority * Code Status History 		
Unit Collect Blood: No	0.9% NaCl bolus			
COVID-19 Vaccine: Unknown Required Isolations: None	ondansetron (ZOFRAN) injection 4 mg	O DNR / Full Scope of Treatment		
No attending provider	pantoprazole (PROTONIX) injection 80 mg	O DNR / Limited Scope of Treatment		
Allergies: No Known Allergies	Continuous			
PCP: None	dextrose 5 % and 0.9 % NaCl infusion			
CrCl: None	Code Status	Next Required	✓ <u>A</u> ccept	
	Full Code / Full Scope of Treatment	Continuous, Starting on Wed 3/8/23 at 1427, Until Specified Mo	dify Discontinue	No Orders
Social Determinants:	Lab			
* 😫 🗰 🕁	CBC and differential	STAT, On Wed 3/8/23 at 0/10, For 1 occurrence Specimen Types - Blood;, New collection	dify Discontinue	
🗢 🟠	Respiratory Oxygen Therapy	Continuous, Starting on Tue 3/7/23 at 2000, Until Specified Mo	dify Discontinue	
ADMITTED: TODAY Patient Class: Emergency Upper Gl bleed		Nasal Cannula Liters per Minute: 2 lpm Fi02%: 100% 92%		
Ht: 180.3 cm (5' 10.98") Last Wt: 86.2 kg (190 lb) BMI: 26.51 kg/m ² ! RSA: 2.08 m ²				Save Work
NEW RESULTS (LAST 36H)				© Sign & Hold ✓ Sign

CODE STATUS – ADULT



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Epic - 🛗	Code Status - Adult			🗸 Accep	t 🧿 🖨 Print 🔶 🕞 Log Out 🧃
	Current INPATIENT Code Status / Scope of Treatment Orders (From admission, onward) Start Ordered 03/08/23 1427 Full Code / Full Scope of Treatment Continuous 03/08/23 1426 Current OUTPATIENT Code Status / Scope of Treatment Orders (From admission, onward) (From admission, onward) None	See POLICY: Do Not Re * Explanation of adult coc * Is a 2nd physician confi * Decision-maker priority * Code Status History Full Code DNR / Full Scope of Treat	esuscitate (DNR) and Scope of Treatment Order (SOTO) de status selections irmation of diagnosis required? tment		Corders Corders Coptions Coptions
MRN	Code Status History (prior to any current orders listed above)	DNR / Limited Scope of T	Treatment 🗸	Accept X Cancel	
Code: Full Co Location Phone Service: Emerge	Date Active Date Inactive Status Order ID Comments User Context 3/7/2023 3/8/2023 0711 Full Code 601225776 Jim Urgent, MD ED 0840 Advance Directive and Legal Guardian Documents No documents found Full Code Full	Process Instructions:	If patient has no pulse and is not breathing: DO NOT RESUSCITATE If patient has pulse and/or is breathing, but condition is deteriorating: LIMITED SCOPE OF TREATMENT	Î	tment 1432, Until Specified
CSN: 60000406 Jnit Collect Blc COVID-19 Vacc Required Isolat No attending p	Latest Advance Directive Note No notes found. Guardian / Relative Information from Patient Demographics Legal Relationship Relationship to Patient Name Guardian?		 DO use medical treatment determined by the treatment team to be appropriate. These treatments may include vasopressors and other medications, IV fluids / medication, cardiac monitoring, and synchronized cardioversion. DO consider use of less invasive airway support such as BiPAP or CPAP. DO minimize suffering with medication, wound care. DO provide oral and body hygiene; keep warm and dry. DO consider Palliative Care. DO NOT initiate endotracheal intubation or mechanical ventilation. 	, i	
Allergies: No Ki Primary Ins.: No PCP: None CrCl: None		Authorization determine	ed by Agreement of patient with current decision-making capacity Conforms with patient's portable DNR order or Medical Order for Scope of Treatment (MOST) Conforms with patient Agreement of legally authorized decision maker(s)	ent's living will	
Social Determin		2nd physician confirmat Frequency: Reference Links:	tion of diagnosis (Recommended) Continuous Starting J/8/2023 Today Tomorrow At 1432 Starting: Today 1432 Ending: Until Specified • CODE STATUS HISTORY • Code	Accept X Cancel	
3MI: 26.51 kg/ 3SA: 2.08 m ²	Next Required			🖌 Accer	k √ <u>S</u> ign

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	Current INPATIENT Code Status / Scope of Treatment Orders (From admission, onward) Start Ordered 03/08/23 1427 Full Code / Full Scope of Treatment Continuous O3/08/23 1426 Current OUTPATIENT Code Status / Scope of Treatment Orders	 See POLICY: Do Not Res * Explanation of adult code * Is a 2nd physician confir * Decision-maker priority * Code Status History 	suscitate (DNR) and Scope of Treatment Order (SOTO) e status selections mation of diagnosis required?	Corders - Options -
Eli-G	(From admission, onward)	○ Full Code		sociation
Male, 60 y.	None	O DNR / Full Scope of Treatr	ment	nus de Nous 🗿 Novt
MRN Bed	Code Status History (prior to any current orders listed above) Code Date Active Date Inactive Status Order ID Comments User Context	DNR / Limited Scope of Tr D	reatment	
Code: Full Co Location Phone Service: Emerge O Search	3/7/2023 3/8/2023 0711 Full Code 601225776 Jim Urgent, MD ED 0840 Advance Directive and Legal Guardian Documents No documents found	Process Instructions:	If patient has no pulse and is not breathing: DO NOT RESUSCITATE	tment 1432, Until Specified
CSN: 60000406 Unit Collect Bld	Latest Advance Directive Note		 DO use medical treatment determined by the treatment team to be appropriate. These treatments may include vasopressors and other medications, IV fluids / medication, cardiac monitoring, and synchronized cardioversion. DO consider use of less invasive airway support such as BiPAP or CPAP. 	
Required Isolat	Guardian / Relative information from Patient Demographics Guardian? Legal Relationship Relationship to Patient Name Guardian?		DO minimize suffering with medication, wound care. DO provide oral and body hygiene; keep warm and dry. DO consider Palliative Care. DO NOT initiate endotracheal intubation or mechanical ventilation.	
Allergies: No Ki		• Authorization determined	d by	
Primary Ins.: No			Agreement of patient with current decision-making capacity	
CrCl: None			Conforms with patient's portable DNR order or Medical Order for Scope of Treatment (MOST) Conforms with patient's living will	
		2nd physician confirmation	on of diagnosis (Recommended)	
		Frequency:	Continuous	
* 9			Starting For 3/8/2023 Today Tomorrow Hours Days Weeks	
•			At 1432 @	
ADMITTED: TOD			Starting: Today 1432 Ending: Until Specified	
Patient Class: E Upper GI bleed		Reference Links:	CODE STATUS HISTORY CODE STATUS HISTORY	
Ht: 180.3 cm (5			✓ <u>A</u> ccept × <u>C</u> ancel	
Last Wt: 86.2 k		O DNR / Comfort Care Scop	e of Treatment	
BMI: 26.51 kg/ BSA: 2.08 m ²				*
NEW RESULTS (Next Required		Accession of the second sec	t d Sign

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	Current INPATIENT Code Status / Scope of Treatment Orders (From admission, onward) Start Ordered 03/08/23 1427 Full Code / Full Scope of Treatment Continuous O3/08/23 1426 Current OUTPATIENT Code Status / Scope of Treatment Orders	 See POLICY: Do Not Res * Explanation of adult code * Is a 2nd physician confir * Decision-maker priority * Code Status History 	suscitate (DNR) and Scope of Treatment Order (SOTO) e status selections mation of diagnosis required?	Corders - Options -
Eli-G	(From admission, onward)	○ Full Code		sociation
Male, 60 y.	None	O DNR / Full Scope of Treatr	ment	nus de Nous 🗿 Novt
MRN Bed	Code Status History (prior to any current orders listed above) Code Date Active Date Inactive Status Order ID Comments User Context	DNR / Limited Scope of Tr D	reatment	
Code: Full Co Location Phone Service: Emerge O Search	3/7/2023 3/8/2023 0711 Full Code 601225776 Jim Urgent, MD ED 0840 Advance Directive and Legal Guardian Documents No documents found	Process Instructions:	If patient has no pulse and is not breathing: DO NOT RESUSCITATE	tment 1432, Until Specified
CSN: 60000406 Unit Collect Bld	Latest Advance Directive Note		 DO use medical treatment determined by the treatment team to be appropriate. These treatments may include vasopressors and other medications, IV fluids / medication, cardiac monitoring, and synchronized cardioversion. DO consider use of less invasive airway support such as BiPAP or CPAP. 	
Required Isolat	Guardian / Relative information from Patient Demographics Guardian? Legal Relationship Relationship to Patient Name Guardian?		DO minimize suffering with medication, wound care. DO provide oral and body hygiene; keep warm and dry. DO consider Palliative Care. DO NOT initiate endotracheal intubation or mechanical ventilation.	
Allergies: No Ki		• Authorization determined	d by	
Primary Ins.: No			Agreement of patient with current decision-making capacity	
CrCl: None			Conforms with patient's portable DNR order or Medical Order for Scope of Treatment (MOST) Conforms with patient's living will	
		2nd physician confirmation	on of diagnosis (Recommended)	
		Frequency:	Continuous	
* 9			Starting For 3/8/2023 Today Tomorrow Hours Days Weeks	
•			At 1432 @	
ADMITTED: TOD			Starting: Today 1432 Ending: Until Specified	
Patient Class: E Upper GI bleed		Reference Links:	CODE STATUS HISTORY CODE STATUS HISTORY	
Ht: 180.3 cm (5			✓ <u>A</u> ccept × <u>C</u> ancel	
Last Wt: 86.2 k		O DNR / Comfort Care Scop	e of Treatment	
BMI: 26.51 kg/ BSA: 2.08 m ²				*
NEW RESULTS (Next Required		Accession of the second sec	t d Sign

