You have a choice about whether or not you want CPR (cardiopulmonary resuscitation) attempted if your heart or breathing stops. You should make that choice when you feel well and have the information you need.

One thing to consider is that CPR is not as effective as it seems on TV or in movies. Chronic health conditions affect how successful CPR can be, and there are side effects that are important to understand.

This fact sheet can help you make your decision about CPR. If you have additional questions, talk with your doctor or a Life Care Planning facilitator.
HOW IS CPR done?
CPR will likely include:

• Pressing hard on your chest and sometimes also breathing into your mouth.
• Using electrical shock and drugs to try to start your heart.
• Placing a tube to open your airway and a machine to help you breathe.

WHEN IS CPR most effective?
CPR works best if:

• You are healthy with no serious illness.
• It is performed within a few minutes of when your heart or breathing stops.

WHAT ARE the potential side effects of CPR?
A lack of oxygen from not breathing could lead to brain damage. Also, due to the force on the body when CPR is performed, you could experience:

• Damage to your ribs.
• The need to be cared for in an ICU (intensive care unit).
• Weakened lungs and the need to be on a breathing machine.

Some Surprising Statistics about CPR
In a nursing home: After CPR is performed, there is less than a 3 percent chance of survival.*

In a hospital: As of 2009, 1 in 5 patients who receive CPR will survive to hospital discharge.** About 1 in 10 of all patients who survive CPR in a hospital setting have healthy brain functioning.***
IF YOU DO want CPR attempted
You do not need to take additional action in order to receive CPR in the community or in a hospital setting. Emergency Medical Responders and bystanders who are trained in CPR give CPR automatically.

IF YOU DO NOT want CPR attempted
You will need to take action. The best way to make your views known is to talk to your doctor and loved ones about your decision. Although your wishes may not be known at the time of an emergency, appropriate action will be taken once they are known. Talk to your doctor about what documents you should complete to make your wishes known.

If you decide not to have CPR attempted, other treatments will still be provided. If antibiotics, intravenous fluids, or other medical treatments are appropriate, they will be given. Whatever your decision is about CPR, medical staff will focus on keeping you comfortable and providing the care you need.

QUESTIONS TO consider
• What personal experience have you had with friends or family who have had CPR? How does that affect your own decisions?
• In your opinion, what are the advantages and disadvantages of CPR?
• Are there other people you would like to have participate in this decision-making process?
• Do you have other questions that need to be answered before deciding?

Your decision about whether or not you want CPR may change over time. This is normal, but a change in your views may not be obvious to others unless you let them know. Be sure you keep your doctor and loved ones informed of your current wishes about CPR.
This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor. If you have questions or need more information about your medication, please speak to your doctor or pharmacist. Some photos may include models and not actual patients.

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