

## Goals of Care Designations Explained

### **R: Medical Care and Interventions, Including Resuscitation followed by Intensive Care Unit**

Goals of Care and interventions are for cure or control of the Patient's condition. The Patient would desire and is expected to benefit from ICU care if required.

**R1: Patient is expected to benefit from and is accepting of any appropriate investigations/interventions that can be offered including resuscitation followed by ICU care.**

- **Resuscitation:** is undertaken for acute deterioration, may include intubation and chest compression
- **Life Support Interventions:** are usually undertaken
- **Life Sustaining Measures:** are used when appropriate
- **Major Surgery:** is considered when appropriate.
- **Transfer:** is considered for diagnosis and treatment

**R2: Patient is expected to benefit from and is accepting of any appropriate investigations/interventions that can be offered including ICU care and intubation, but excluding chest compression**

- **Resuscitation:** is undertaken for acute deterioration, may include intubation but **exclude** chest compression
- **Life Support Interventions:** may be offered **without** chest compression
- **Life Sustaining Measures:** are used when appropriate
- **Major Surgery:** is considered when appropriate
- **Transfer:** is considered for diagnosis and treatment

**R3: Patient is expected to benefit from and is accepting of any appropriate investigations/interventions that can be offered including ICU care, but excluding intubation and chest compression**

- **Resuscitation:** is undertaken for acute deterioration but **without** intubation and **without** chest compression
- **Life Support Interventions:** may be offered **without** intubation and **without** chest compression
- **Life Sustaining Measures:** are used when appropriate
- **Major Surgery:** is considered when appropriate
- **Transfer:** is considered for diagnosis and treatment

### **M: Medical Care and Interventions, Excluding Resuscitation**

Goals of Care and interventions are for cure or control of the Patient's condition. The Patient either chooses to not receive care in an ICU or would not be expected to benefit from ICU Care.

**M1: All medical and surgical interventions directed at cure and control of condition(s) are considered, within the bounds of what is clinically appropriate, excluding the option of ICU care**

- **Resuscitation:** is **not** undertaken for cardio respiratory arrest.
- **Life Support Interventions:** should **not** be initiated, or should be discontinued after discussion with Patient.
- **Life Sustaining Measures:** are used when appropriate.
- **Transfer:** to another location of care is considered if that location provides more appropriate circumstances for diagnosis and treatment
- **Major Surgery:** is considered when appropriate. Resuscitation during surgery or in the recovery room can be considered, including short term physiologic and mechanical support in an ICU, in order to return the Patient to prior level of function. The possibility of intra-operative death or life threatening deterioration should be discussed with the Patient in advance of the proposed surgery and general decision making guidance agreed upon.

**M2: All interventions that can be offered in the current location of care are considered. ICU care is not considered an option.**

- **Resuscitation:** is **not** undertaken for cardio respiratory arrest.
- **Life Support Interventions:** should **not** be initiated, or should be discontinued after discussion with the Patient.
- **Life Sustaining Measures:** are used when appropriate and consistent with overall Goals of Care and aimed at symptom relief.
- **Transfer:** is **not** usually undertaken, but can be contemplated if symptom management or diagnostic efforts aimed at understanding symptoms can be best undertaken at that other location.
- **Major Surgery:** is considered when appropriate. Resuscitation during surgery or in the recovery room can be considered, including short term physiologic and mechanical support in an ICU, in order to return the Patient to prior level of function. The possibility of intra-operative death or life threatening deterioration should be discussed with the Patient in advance of the proposed surgery and general decision making guidance agreed upon.

### **C: Medical Care and Interventions, Focused on Comfort**

Goals of Care and interventions are for the active compassionate treatment of the Patient with a terminal illness and for those close to them. This includes medical care for symptom control and psychosocial and spiritual support.

**C1: All care is directed at maximal symptom control and maintenance of function without cure or control of underlying condition.**

- **Resuscitation:** is not undertaken.
- **Life Support Interventions:** should **not** be initiated, or should be discontinued after discussion with the Patient.
- **Life Sustaining Measures:** are used for goal directed symptom management.
- **Major Surgery:** is not usually undertaken, but can be contemplated for procedures aimed at symptom relief. Resuscitation during surgery or in the recovery room can be considered, including short term physiologic and mechanical support in an ICU, in order to return the Patient to prior level of function. The possibility of intra-operative death or life threatening deterioration should be discussed with the Patient in advance of the proposed surgery and general decision making guidance agreed upon.
- **Transfer:** is not usually undertaken for an acute deterioration but to better understand or control symptoms. Transfer to Hospice may be considered.

**C2: All care is directed at preparation for imminent death [usually within hours or days] with maximal efforts directed at symptom control.**

- **Resuscitation:** is not undertaken.
- **Life Support Interventions:** should not be initiated, or should be discontinued after discussion with the Patient.
- **Life Sustaining Measures:** should be discontinued unless required for symptom management.
- **Major Surgery:** is not appropriate.
- **Transfer:** is usually not undertaken.

**Life Support Interventions:** mean interventions typically undertaken in the Intensive Care Unit but which occasionally are performed in other locations in an attempt to restore normal physiology. These may include chest compressions, mechanical ventilation, resuscitation, defibrillation, and physiological support.

**Life Sustaining Measures** mean therapies that sustain life without supporting unstable physiology. Such therapies can be used in many other clinical circumstances. When viewed as life sustaining measures, they are offered in either a) the terminal stages of an illness in order to provide comfort or prolong life, or b) to maintain certain bodily functions during the treatment of intercurrent illnesses. Examples include enteral tube feeding and intravenous hydration. These measures should be clinically relevant and congruent with the Patient's goals.

**Resuscitation** means the initial effort undertaken to reverse and stabilize an acute deterioration in a Patient's vital signs. This may include chest compressions for pulselessness, mechanical ventilation, defibrillation, cardioversion, pacing, and intensive medications. Patients who have refused to have chest compressions and/or mechanical ventilation may still be considered for resuscitative measures (see Designation R3)