

GOALS OF CARE DESIGNATIONS: QUICK REFERENCE GUIDE



<p>R</p> <p>Medical Care and Interventions including Resuscitation followed by Intensive Care Unit</p>	<p>R1: Patient is expected to benefit from and is accepting of any appropriate investigations/interventions that can be offered including the option of ICU care and resuscitation.</p>	When appropriate, interventions can include:	
		Site transfer (including ICU Care)	Yes
		Chest Compressions	Yes
		Intubation	Yes
		Resuscitation	Yes
		Life Sustaining Measures	Yes
	Major Surgery	Yes	
	<p>R2: Patient is expected to benefit from and is accepting of any appropriate investigations/interventions that can be offered including the option of ICU care and intubation, but excluding chest compression.</p>	When appropriate, interventions can include:	
		Site transfer (including ICU Care)	Yes
Chest Compressions		No	
Intubation		Yes	
Resuscitation		Yes	
Life Sustaining Measures		Yes	
Major Surgery	Yes		
<p>R3: Patient is expected to benefit from and is accepting of any appropriate investigations/interventions that can be offered including the option of ICU care, but excluding intubation and chest compression.</p>	When appropriate, interventions can include:		
	Site transfer (including ICU Care)	Yes	
	Chest Compressions	No	
	Intubation	No	
	Resuscitation	Yes	
	Life Sustaining Measures	Yes	
Major Surgery	Yes		
<p>M</p> <p>Medical Care and Interventions excluding Resuscitation</p>	<p>M1: Goals of Care and interventions are for cure or control of illness, excluding the option of ICU care. For non-hospital patients, transfer to an Acute Care facility is considered if required for diagnosis and treatment.</p>	When appropriate, interventions can include:	
		Site transfer (excluding ICU Care)	Yes
		Chest Compressions	No
		Intubation	No
		Resuscitation	No
		Life Sustaining Measures	Yes
	Major Surgery	Yes	
	<p>M2: Goals of Care and interventions are for cure or control of illness, excluding the option of ICU care. For non-hospital patients, transfer to an Acute Care facility or surgical intervention, are not generally undertaken for an acute deterioration but may be considered in special circumstances to better understand or control symptoms.</p>	When appropriate, interventions can include:	
		Site transfer (only for symptom control)	
Chest Compressions		No	
Intubation		No	
Resuscitation		No	
Life Sustaining Measures		Yes	
Major Surgery (only for symptom control)			
<p>C</p> <p>Medical Care and Interventions focused on Comfort</p>	<p>C1: Goals of Care and interventions are for maximal symptom control and maintenance of function without cure or control of underlying condition. Transfer may be undertaken in order to better understand or control symptoms. Surgery may be undertaken in special circumstances to better understand or control symptoms.</p>	When appropriate, interventions can include:	
		Site transfer (only for symptom control)	
		Chest Compressions	No
		Intubation	No
		Resuscitation	No
		Life Sustaining Measures	Yes
	Major Surgery (only for symptom control)		
	<p>C2: Goals of Care and interventions are for physical, psychological and spiritual preparation for imminent death (usually within hours or days). Maximal efforts directed at compassionate symptom control. Transfer is usually not undertaken.</p>	When appropriate, interventions can include:	
		Site transfer	No
Chest Compressions		No	
Intubation		No	
Resuscitation		No	
Life Sustaining Measures		No	
Major Surgery	No		

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 illness. 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).

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