Riverside Health

Cardiopulmonary Resuscitation (CPR)

If you become very sick, you or your family members may be asked whether or not you want CPR if your heart or breathing stops. The best time to think about this is before an emergency. The information below can help you consider what results you would want if you are ever resuscitated, and it can serve as a guide for a discussion with your doctor.

CPR was first used in 1954 as an emergency treatment for people who had an unexpected illness or injury. If it was not successful, the person died. In the 1970s, ventilators became available in hospitals and were able to replace the functions of the heart and lungs even if CPR was unsuccessful. CPR can be used when people are already dying, even if there is no way to reverse the disease or change its outcome. Because of this, discussions about CPR should be part of all good medical care, especially for those with a life-limiting illness. A special medical order is needed if you do not want CPR.

What is CPR?

Chest compressions are used to stimulate the heart, and air is forced into the lungs. In the hospital, and outside of the hospital, when 911 is called, drugs are injected, electric shock may be used and a tube is inserted into the throat so that a machine can breathe for the person.

What can it do?

On television, CPR is effective 75% of the time, and patients often fully recover. However, in real life, CPR is effective in the hospital about 18% of the time. In people who are very sick or frail, the success rate is 3%.

What are the risks?

After receiving CPR, many people require 24-hour care in a facility or may require a constant breathing machine. When this happens, decisions about continuing or stopping treatment must be made by family members.

How can I decide?

If you have a serious illness, talk to your doctor about the likelihood of your heart or breathing stopping, the chances of success from CPR and what your condition would probably be after CPR. You may decide not to have CPR performed. If you receive CPR and your condition is unacceptable to you, you can choose to stop treatments, such as a breathing machine, that keep you alive.

You may also decide to receive CPR, regardless of the outcome. The choice is yours. Write your wishes on an advance directive and choose a health care agent who understands your choices and is willing to honor them. Most importantly, talk about it with the people who are closest to you.

How do I communicate my choices?

Help your medical care providers honor your choices by discussing this information with your physician. For guidance on writing an advance directive or creating other documents to communicate your choices, contact your physician or Riverside Care Navigation at 757-856-7030.