



# Ethical Considerations When Terminating CPR in US Hospitals

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## Background

- Currently no guidelines for terminating CPR for IHCA. However, there are guidelines for terminating CPR for OHCA.
- Terminating CPR is a serious ethical consideration that many health care providers face daily.
- Providing guidelines for CPR termination gives more guidance and can help fight against bias.

## Goal

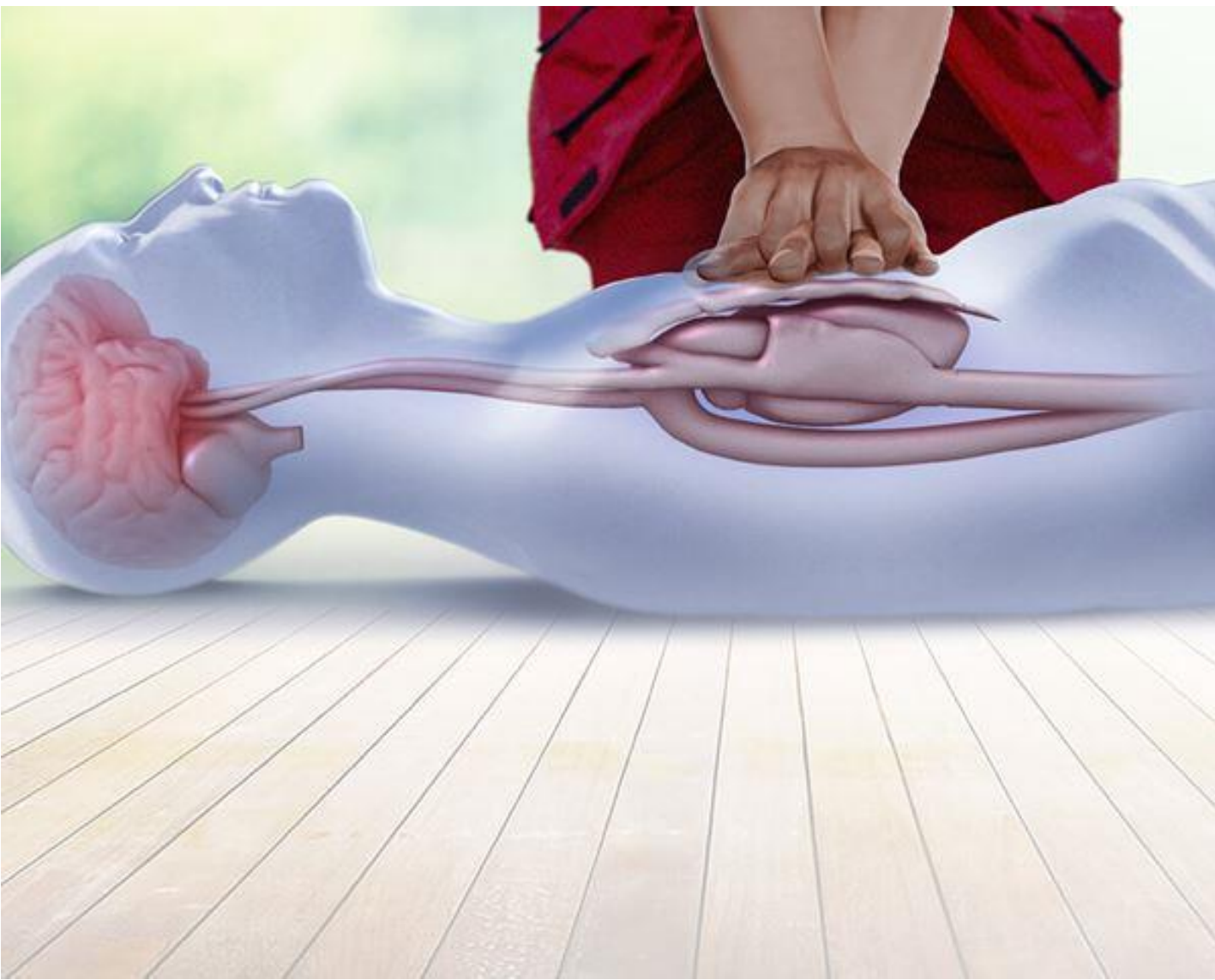
- The purpose of the literature review is to evaluate reasons why healthcare providers terminated CPR for IHCA and address potential biases that contributed to the termination.

## Implementation

- A literature review was conducted on only US hospital IHCA. PubMed, Google Scholar, and NIH were searched for the terms ‘CPR termination’, ‘in-hospital cardiac arrest’, and ‘ethics of CPR termination’.
- Exclusion criteria: studies conducted outside of the US, cardiac arrest for OHCA, CPR started by EMS, and pediatric CPR.
- 32 studies were compiled, seven studies were included.

## Outcomes

- AHA guidelines are contradictory<sup>9</sup>
  - No guidelines on which goals of CPR take priority.
  - No guidelines on who has authority to terminate CPR.
  - Causes discrepancy among physicians across the nation and even in the same hospital.
- No age-related cognitive bias found, specifically left-sided bias in CPR termination for IHCA.<sup>4</sup>
- Patient’s wishes should be evaluated when deciding to terminate CPR
  - Physiological futility vs Normatively futile<sup>11</sup>
  - Cost-effectiveness and life after CPR should be discussed with patients and family members.
- Racial bias in CPR termination for IHCA
  - Black patients were more likely to receive shorter duration of CPR than White patients preintervention.<sup>5</sup>
  - Black patients more likely to receive CPR than White patients, but less likely to survive.<sup>10</sup>



## Next Steps

- More research needs to be conducted on the racial basis of CPR termination.
- Guidelines for CPR termination for IHCA to help health care providers determine when to terminate CPR and reduce the risk of bias.
- Encouraging HCP to educate patients about the cost-effectiveness of CPR in their individual situation and learn their patient’s wishes.

## Conclusion

Guidelines for CPR termination for IHCA are vague at best and usually nonexistent. CPR termination has many ethical and medical considerations. There are extensive guidelines for CPR termination in OHCA cardiac arrest, but no guidelines for IHCA. Furthermore, the AHA’s guidelines for CPR termination for IHCA are contradictory. The lack of guidelines increases the risk for patients to experience bias in their care. Also, having guidelines could make physicians more comfortable with terminating CPR when necessary. Overall, most the greatest importance when deciding to terminate CPR or even start CPR is a patient’s wish. Patient autonomy is the most important part of the decision-making process for CPR termination.

## References

Photo citation: *What is CPR*. cpr.heart.org. (n.d.). <https://www.heart.org/en/health-topics/cpr>

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