



QUEENS VILLAGE FOR SENIORS

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ADVANCED DIRECTIVES OF LIVE-THREATENING ILLNESS

AGREEMENT BETWEEN:

Resident's Name: _____

Family/POA's Name: _____

Initial Date: _____

Revised Date: _____
(annually)

AND

Queens Village For Seniors
Director of care: _____

- 1. COMFORT MEASURES ONLY
Resident will remain at Queens Village. Care would consist of nursing care, pain and symptom management, oral fluids & controlling fever if present with no cardiopulmonary resuscitation – Do Not Resuscitate (DNR)
- 2. COMFORT MEASURES WITH ADDITIONAL TREATMENT
Resident will remain at Queens Village with pain management, oral fluids and fever control plus medications such as antibiotics with no intravenous treatment and no cardiopulmonary resuscitation (DNR)
- 3. TRANSFERS TO ACUTE CARE HOSPITAL WITH _____ CPR
Resident to be transferred to acute care hospital and a physician will decide whether to admit to hospital or return to Queens Village. Cardiopulmonary resuscitation and no admission to an intensive care unit and no life support measures.
- 4. TRANSFER TO ACUTE CARE HOSPITAL WITH CARDIOPULMONARY RESUSCITATION
Resident will be transferred to acute care hospital including intensive care unit and cardiopulmonary resuscitation if necessary.