

**COLORADO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT**  
**CHANGES TO CPR DIRECTIVE REGULATIONS**  
**INFORMATION SHEET**  
**MAY 5, 2009**

A taskforce of the Colorado Department of Public Health and Environment (CDPHE), which included representatives from the department's Emergency Medical & Trauma Services Section, EMS field personnel, medical directors, attorneys, coroners, members of the Colorado Advance Directives Consortium and the Colorado Center for Hospice & Palliative Care, completed a draft revision of the regulations governing implementation of cardiopulmonary resuscitation (CPR) directives by emergency medical service personnel. This draft is being circulated for comment and is available at [www.coems.info/Advance directives](http://www.coems.info/Advance_directives).

The basic purposes of the CPR directive are unchanged: the directive is signed by an individual or (authorized agent) to indicate refusal of CPR in the event of cardiopulmonary arrest or malfunction. CDPHE regulations will continue to require a physician's signature and information to help EMS personnel identify the patient. Other forms of CPR directives will continue to be legal. EMS personnel are immune from any civil or criminal liability when, in good faith, they withhold or withdraw CPR on the basis of a valid CPR directive.

Significant changes and clarifications include:

- To make it easier for the public to prepare CPR directives, the CDPHE website will now provide a template, which can be printed and prepared by the individual, or which can serve as an example for people who wish to create their own CPR directives based on the information contained in the template. The familiar standardized "blue form," currently available from Progressive Services, may still be used.
- Additionally, other documents or items that clearly express an individual's wishes about CPR are permissible.
- A valid CPR directive that has been photocopied, scanned, faxed, or otherwise reproduced shall be honored.
- A patient with a CPR directive is to be evaluated by EMS personnel and be provided appropriate and available palliative treatment and measures as directed by local protocol or on-line medical control. Refusal of CPR does not mean refusal or withdrawal of care and/or transportation.
- Procedures are provided for EMS personnel to follow when presented with a CPR directive.
- Additional details and responsibilities of the physician, patient, and family are beyond the scope of the statute and are no longer included in the rules. Additional educational materials will be developed and made available in the future.

To provide input on the proposed rules or to submit a question, please send an email to [cdphe.hfemsd-emtsProjectsInput@state.co.us](mailto:cdphe.hfemsd-emtsProjectsInput@state.co.us).