

CPR or No CPR:

What you should know



If your heartbeat or breathing stops, CPR may or may not help you.

This fact sheet can help you decide if you want CPR when your heart or lungs stop working. The time to choose is when you feel well and have the facts you need. Ask questions and talk with your doctor and others. Think about what living means to you.

CPR does not fix or improve the reason that caused a person's heart and breathing to stop. Age and health make a difference. You may have poor outcomes if you have serious health problems. The doctor who knows you best can help you make your decisions.

What is CPR?

CPR is done for you by someone else. It can include:

- Breathing into your mouth and pressing on your chest
- Electrical shock and drugs to try to start your heart
- A tube placed down your throat to breathe for you

When is CPR effective?

CPR works best if:

- You are healthy with no other medical problems
- It is given within a few minutes of when your heart or lungs stop working

When is CPR least successful in returning you to your previous health state?

- If you have chronic health problems
- If you have an illness that can no longer be treated
- If you are older and weak

Facts to know

- CPR outcomes of hospitalized patients: Of adults who receive CPR in the hospital, 26 out of 100 will leave the hospital.^{1,2}
- CPR outcomes in long-term care facilities: For adults who are older, weak, and living in a nursing facility, CPR will be successful in 2 out of 100 individuals.³



What else can happen with CPR?

If CPR does not help to get your heart and lungs to work, it may have unwanted outcomes:



- Poor lung function or recovery will require you to be on a breathing machine for an unknown length of time
- Permanent nerve damage and functional changes are possible risk factors of CPR related complications
- You may have brain damage leaving you permanently unconscious
- You may have damage to your ribs
- You may not be able to talk or eat food by mouth
- Your health condition may require high care needs that can only be provided in a hospital or nursing home

If you want to receive CPR:

If you choose CPR, you should talk with your physician about risks and benefits based on your health. Ask your physician these questions:

- Will CPR improve my health?
- Will CPR cause a decline in my physical or mental function?

If you decide you do not want CPR:

If you do not want to try CPR, you will still get the care you need. There are many choices you can make to help you be comfortable and live as well as possible.



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¹Girotra, S., Nallamothu, B.K., Spertus, J.A., Li, Y., Krumholz, H.M., & Chan, P.S. (2012). Trends in survival after in-hospital cardiac arrest. *New England Journal of Medicine*, 367: 1912-20. doi:10.1056/NEJMoal109148

²Benjamin, E.J., Virani, S.S., Callaway, C.W., Chamberlain, A.M., Chang, A.R., Cheng, S., ...Stroke Statistics Subcommittee. (2018). Heart Disease and Stroke Statistics-2018 Update: A Report from the American Heart Association. *Circulation*, 137(12), e67-e492. doi:10.1161/CIR.0000000000000558 [Cardiac Arrest information on pages e355-372]

³Shah, M.N., Fairbanks, R.J., Lerner, E.B. (2007). Cardiac arrests in skilled nursing facilities: continuing room for improvement? *J Am Med Dir Assoc*. 8(3 Suppl 2): e27-31.