

WEST VIRGINIA CODE: §16-30C-5

§16-30C-5. Presumed consent to cardiopulmonary resuscitation; health care facilities not required to expand to provide cardiopulmonary resuscitation.

Every person shall be presumed to consent to the administration of cardiopulmonary resuscitation in the event of cardiac or respiratory arrest, unless one or more of the following conditions, of which the health care provider has actual knowledge, apply:

- (1) A do-not-resuscitate order in accordance with the provisions of this article has been issued for that person;
- (2) A completed living will or combined medical power of attorney and living will for that person is in effect, pursuant to the provisions of §16-30-1 *et seq.* of this code, and the person is in a terminal condition; or
- (3) A completed medical power of attorney for that person is in effect, pursuant to §16-30-1 *et seq.* of this code, in which the person indicated that he or she does not wish to receive cardiopulmonary resuscitation, or his or her representative has determined that the person would not wish to receive cardiopulmonary resuscitation.
- (4) A completed portable orders for scope of treatment form in which a qualified physician has ordered do-not-resuscitate.

Nothing in this article shall require a nursing home, personal care home, hospice, or extended care facility operated in connection with hospitals to institute or maintain the ability to provide cardiopulmonary resuscitation or to expand its existing equipment, facilities, or personnel to provide cardiopulmonary resuscitation: *Provided*, That if a health care facility does not provide cardiopulmonary resuscitation, this policy shall be communicated in writing to the person, representative, or surrogate decision maker prior to admission.