What happens …if my heart stops?

Information for service users and carers
It is sad but true.
Everybody dies sometime.

We are born, we grow up, we grow old, we die.
That’s life!

Thinking about dying usually makes us sad, and a bit frightened.

It’s not something we like to talk about much. We think “If we talk about it, it will happen.”
Why do people die?

It might be from an accident.

It might be from a serious illness that you can’t get better from.

It might just be from old age.

But in the end, our heart stops beating, and we die.
When you die, your heart stops beating.

No blood gets pumped round your body, so very quickly the rest of your body stops working. Your kidneys, your liver, your lungs, all stop working.

Your brain will stop working about 3 minutes after your heart.
If your heart stops beating, it might be possible to try to start it beating again.

This is called cardiopulmonary resuscitation or CPR.

It might include pressing down hard on your chest, again and again.

Or mouth-to-mouth breathing.
Ambulance crew or hospital staff might use a machine to give your heart an electric shock to make it start working again.

Or put a tube down your throat to help you breathe.

Or give you drugs to help your heart and lungs work properly again.
CPR does not work every time. Most people who have CPR will not get better.

CPR will not fix what made your heart stop.

If you had a serious illness, you will still have a serious illness.

If you were old, you will still be old.

In the end, we all die.
So if your heart stops, your doctor has to decide if CPR is the best thing to do for you.

If CPR will not work, or will only start your heart beating for a short time, it will not be tried.

And if CPR might leave you with injuries that make you more ill than before, it will not be tried.

The decision has nothing to do with how old you are, or how disabled. It is about what is best for you now.
One day, your heart will stop, as part of the natural process of dying. You might want to talk about what happens next with your family, friends and carers.

If you are already seriously ill, and near the end of your life, you might prefer to die naturally and quietly.

Or you might want to keep going as long as possible, even if there are risks.

What you think is important and the doctor will listen to what you say.
If you and your doctor agree that CPR will not work for you, or will make you more ill, they have to fill in a form called a DNACPR. This stands for Do Not Attempt CPR. It tells everyone who looks after you that this decision has been made. There is only one copy of this form. It cannot be copied.

The form will go with you if you go in an ambulance, or go home, or go into hospital. Then everyone knows what to do if your heart stops.

If your health changes, your doctor will look again at the decision. They will talk with you about any changes.
If doctors do decide not to attempt CPR, that will not affect any of your other treatment.

You will still get the best care and medicines for your condition.

If you or your family do not think you have had a chance to talk about this properly, please talk to your nurse, or the person who gave you this form.

Or if you don’t want to talk about it at all, that’s fine too. We are here to listen if and when you do.
You might want to talk about this booklet with other people in your life, such as:

Your family and friends or carers.

Someone from your religion.

An advocacy service.

The Community Learning Disability Nursing Team.

The Palliative Care Team.

Or you GP or District Nurse.

www.rdash.nhs.uk
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This information is correct at the time of publishing

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