**Appendix 12**

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**Trust Head Quarters**

**Woodfield House**

**Tickhill Road**

**Balby**

**DN4 8QN**

**DNACPR – CHILD UNDER 16.**

As Medical Director for Rotherham Doncaster and South Humber NHS Foundation Trust I accept the attached DNACPR order for …………………………………………………………

Originally made by ………………………………………………… of ………………………………………………………………………………………………

I recommend that all staff working with this child employed by Rotherham Doncaster and South Humber NHS Foundation Trust comply with this order.

Signature:

Name and Designation:

Date: