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May 25, 2006

Ronald H. Jarashow, Esquire
Franch, Jarashow & Smith, P.A.
107 Ridgely Avenue, Suite 9
Annapolis, Maryland 21401

RE: Israel R. Neustadter

Dear Ron:

Receipt of your correspondence of May 12, 2006 is acknowledged.

With respect to the issues you have raised in paragraphs A, B, C and D, I can offer the Hospital's response as follows. Regarding issues A, B and C, in order to answer those questions, the Hospital would have to interview the doctors involved and take a position one way or another based on what they say. This the Hospital declines to do. I would note parenthetically that even if you proceed with your lawsuit, none of these issues would be applicable with respect to the Hospital.

Paragraph D is something we can respond to. Mr. Neustadter was, in fact, considered DNR. There was an order to that effect, a copy of which is enclosed with this correspondence. As to marking his file on the outside, this is something that is not done. As to how The DNR order was handled, from the Hospital's perspective, it was handled appropriately.

If the foregoing response is satisfactory to your client, I would like a Line of Dismissal With Prejudice of the action that you have apparently filed. If not, I will accept service on behalf of the Hospital. I remain,

Very truly yours,

David A. Levin

DAL:cw

HC
HOLY CROSS HOSPITAL
**DO NOT RESUSCITATE
PHYSICIAN ORDER FORM**

NEUSTADTER, ISRAEL 91Y
03/10/03 0306800162
3127 N. UNIVERSITY AVE.
1/P 8155
1111 UNIV BLVD W.
SILVER SPRING MD 20910
301 849-1310 Addressograph

IMPORTANT

- * If Patient is not competent to make his/her own decisions, see administrative policy **"CONSENT TO WITHHOLD OR WITHDRAWAL TREATMENT"**. Completion of other forms is required.
- * See reverse side for guidelines for completion of this form.

SECTION I**DO NOT RESUSCITATE**

I have discussed the decision to withhold cardiopulmonary resuscitation from Israel Neustadter
with Dr. [Signature] (RELATIONSHIP TO PATIENT) PATIENT NAME

On the basis of this discussion or on the basis of an advance directive, if a cardiopulmonary arrest occurs, NO resuscitative measures are to be performed.

PHYSICIAN SIGNATURE: John A. B. II DATE: 3/16/03 TIME: _____

SECTION II**PRE-ARREST ORDERS**

Before cardiopulmonary arrest occurs, the patient is a candidate for the following:

- ☒ Intubation ☐ Lab/Diagnostics ☒ IV Pressor Therapy
☒ Defibrillation ☒ IV Antiarrhythmic Therapy ☒ Cardioversion
☐ Other NO CPR
☐ No to all of the above

PHYSICIAN SIGNATURE: John A. B. II DATE: 3/16/03 TIME: 1415

SECTION III**CHANGE - IN - STATUS ORDERS**

1. ☐ **DNR ORDER RESCINDED**

PHYSICIAN SIGNATURE: _____ DATE: _____ TIME: _____

2. ☐ **SEE UPDATED DNR ORDERS**

PHYSICIAN SIGNATURE: _____ DATE: _____ TIME: _____

DO NOT RESUSCITATE FORM

GUIDELINES FOR COMPLETION OF FORM

2. The DNR order is discussed with the patient or responsible decision-maker prior to writing the order. (See administrative policy "Consent to Withhold or Withdrawal Treatment")

Discussion includes:

- The fundamental understanding of resuscitation therapy.
- The appropriate use of this therapy.
- Conditions which would include or preclude the patient as a candidate for this therapy.
- The physician's recommendation regarding the therapy for this individual patient.

- Patients or responsible decision-maker, in conjunction with the attending physician, makes the decision regarding the DNR status. If there is a conflict, refer to the policy concerning withholding of treatment.

3. If the decision is to write the DNR order, the procedure is as follows:

- a. The attending physician is responsible for completion of the DNR order form within 24 hours of order. (Forms available at Nursing Unit)

Section I - DO NOT RESUSCITATE OR DER

1. Indicate name of patient and other if discussed with other than patient.
2. Sign and indicate date and time.

Section II - PRE-ARREST ORDERS

1. Determine and check appropriate treatments for this patient to receive previous to any arrest.
2. Sign and indicate date and time.

Section III - CHANGE - IN - STATUS ORDERS

This section is to be used only when the

1. DNR order is rescinded, or
 2. A new DNR order form has been completed.
- b. Once completed, the newly written DNR form is placed IN FRONT of the physician orders section of the patient chart by the physician. The unit secretary or RN will transcribe the DNR orders to the patient care profile (PCP) and transfer the DNR form to the front of the chart. The "ACTIVE" DNR form will remain in the front of the chart and is not to be thinned. "INACTIVE" DNR orders are placed in the "MISCELLANEOUS" section of the chart. "INACTIVE" DNR orders will not be thinned from the "MISCELLANEOUS" section.
- c. The DNR order must be reconsidered when the patient is transferred to or from a critical care unit, the operating room or at change of attending physician.