



Current as of Sep 2025

Checklist for Acute Resuscitation Plan SW065 documents to be uploaded to The Viewer

This document supports the Statewide Office of Advance Care Planning (OACP) in uploading Acute Resuscitation Plan (ARP) SW065 documents from private facilities and residential aged care homes (RACHs) to The Viewer/ACP Tracker.

IN SCOPE

- ✔ ARP documents made by private facilities (e.g., Queensland private hospitals, non-Queensland Health (QH) community services (non-government organisations, General Practitioners) and RACHs (with no ability to directly enter ARPs in The Viewer/ieMR)
- ✔ Voided ARPs received from private facilities and RACHs.

OUT OF SCOPE

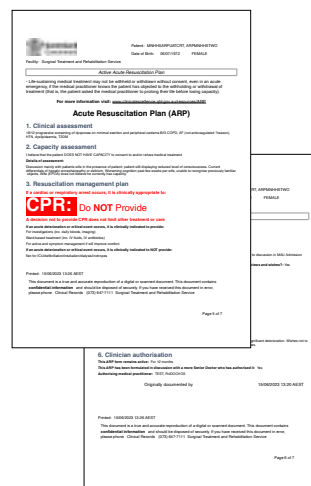
- ✘ ARP documents made in, or received from, integrated electronic Medical Records (ieMR) QH digital hospitals or non-ieMR QH hospitals (see examples below)
- ✘ ARP documents from private facilities that are not in an SW065 format
- ✘ ARPs with Section 6: Clinician authorisation box ticked 'For this admission/attendance'
- ✘ Expired ARPs
- ✘ SW065 ARP documents from Mater Health (future opportunities for sharing of ARPs currently being investigated).

The checklist outlines the steps and standard criteria used by the OACP to determine eligibility of an ARP to be uploaded to The Viewer. It aligns with the QH [Acute Resuscitation Plan Clinical Guidelines](#) and supports clinicians to have access to quality documents.

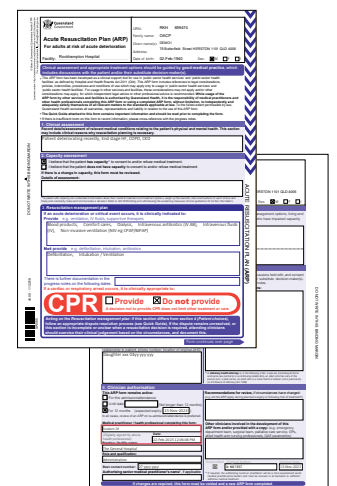
If any issues are identified that prevent the documents from being uploaded, the sender will be notified. The sender may be able to resolve these issues or seek assistance from local ARP education contacts.

Following the steps and criteria provided ensures accurate and timely uploads to the correct patient record.

Please note: The OACP verifies the completion of ARPs against standard criteria. However, it does not confirm the content of ARP documents uploaded to The Viewer. The use of ARP documents on The Viewer must comply with service policies and procedures, as well as Queensland legislation.



Out of scope ieMR ARP



Out of scope non-ieMR ARP

Example of digital ARP (with digital date/time stamp visible)



Checklist for Acute Resuscitation Plan SW065 documents to be uploaded to The Viewer

Steps to follow

- The document is in the ARP SW065 format (old or new).
- The document is clear and legible.
- The ARP was created in a private facility or RACH.
- The personal details of the individual to whom the ARP belongs have been entered, including:
 - Family name
 - Given name(s)
 - Date of birth (DOB).
- All six (6) sections are fully completed.
- In Section 6, the ARP is currently active* and one of the following options ticked:
 - 'Until date' (not longer than 12 months), or
 - 'For 12 months**'.
 Note: 'For this admission/attendance' are not accepted.
- The document is signed and dated by a medical practitioner/health professional.
- Voided documents are clearly marked with:
 - Two diagonal lines across the front and back pages
 - The word 'VOID' written between the lines
 - The document signed and dated to indicate voiding.
- All pages of the document are attached, with the person's name and DOB or Service ID sticker on the top of each page.
- Copies/scans of completed ACP documents are sent to:
 - Email: acp@health.qld.gov.au
 - Post: PO Box 2274 Runcorn QLD 4113
 - Fax: 1300 008 227.

*The 'active' time-period is based on date of signing by the medical practitioner/health professional completing the form.

**Older ARP documents with 'For this and subsequent admissions' selected will be limited to 12 months.

Queensland Government
Acute Resuscitation Plan (ARP)
 For adults at risk of acute deterioration

Family name: _____
 Given name(s): _____
 Address: _____
 Date of birth: _____ Sex: M F O

1. Clinical assessment
 Record details/assessment of relevant medical conditions relating to the patient's physical and mental health. This section may include clinical reasons why resuscitation planning is necessary.

2. Capacity assessment
 I believe that the patient has capacity to consent to and/or refuse medical treatment.
 I believe that the patient does not have capacity to consent to and/or refuse medical treatment.
 If there is a change in capacity, this form must be reviewed.
 Details of assessment: _____

3. Resuscitation management plan
 Record details/assessment of relevant medical conditions relating to the patient's physical and mental health. This section may include clinical reasons why resuscitation planning is necessary.
 Provide: e.g. ventilation, IV fluids, supportive therapies.
 Do not provide: e.g. defibrillation, intubation, antibiotics.

There is further documentation in the progress notes on the following date(s): _____
 If an acute deterioration or critical event occurs, it is clinically appropriate to: _____

CPR Provide Do not provide
 A decision not to provide CPR does not limit other resuscitation options.

Acting on the Resuscitation management plan: If this section differs from section 4 (patient choices), follow an appropriate dispute resolution process (see Quick Guide). If the dispute remains unresolved, or this section is incomplete or unclear when a resuscitation decision is required, alerting clinicians should exercise their clinical judgement based on the circumstances, and document this.

✓ If all criteria are met, the document can be uploaded to The Viewer.

Contact us

www.mycaremychoices.com.au

acp@health.qld.gov.au

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