

Do Not Resuscitate (DNR) Orders in Sri Lanka: A Comparative Legal Analysis with the United Kingdom and Australia

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A Resuscitation Plan is a medically authorised order to use or withhold resuscitation interventions. Do-Not-Resuscitate (DNR) order concepts are widely used in healthcare systems in developed countries to assist in the delivery of high-quality care, particularly for individuals who are at the end of life and for whom palliative approaches, rather than aggressive medical care, are most appropriate. These orders uphold patient autonomy, ensuring that medical interventions align with individual values and preferences. The existing laws relating to DNR orders in Sri Lanka seem to be incomplete and perhaps lacking comprehensive provisions. The main objective of this research is to explore the current legal state of DNR orders in Sri Lanka and gain insights for a comprehensive legal framework, through a comparative legal analysis with the well-established legal frameworks in the United Kingdom (UK) and Australia. For this purpose, the following aspects are addressed in this paper: (i) the legal and ethical challenges related to DNR orders in Sri Lanka; (ii) legal frameworks for DNR orders in the UK and Australia compared to those in Sri Lanka; and, (iii) evidence-based recommendations for developing a robust and ethically sound framework for DNR orders in Sri Lanka. This research employs a qualitative methodology, focusing on the comparative analysis of legal and ethical frameworks. The study involves a thorough review of relevant literature, legal documents, guidelines, and policies from Sri Lanka, the UK, and Australia. Comparative legal analysis highlights differences and similarities between the countries' approaches to DNR orders. In terms of research implications, this study aims to enhance the quality of end-of-life care for patients. Developing a robust framework for DNR orders will provide legal and ethical clarity for patients, substitute decision makers, and healthcare providers, reducing uncertainty and potential conflicts in clinical practice. These recommendations aim to address the compelling need of making policy suggestions to develop a robust law on DNR orders by addressing this legal void.

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