

## **ABSTRACT** (v AJ)

**Introduction to the Issue:** The diploma thesis deals with ethical and legal issues related to the provision of cardiopulmonary resuscitation, particularly the use of advance directive in intensive care units. Although advance directive have been part of legislation in medical practice for several years, they are not widely used. However, this document is crucial as it protects patient autonomy in situations where the patient cannot express their wishes and preferences. The use of this document in medical practice raises questions, especially regarding its content, accessibility, and adherence.

**Objective:** The main goal of this thesis is to identify the ethical and legal aspects of cardiopulmonary resuscitation, specifically in relation to patients advance directive. The study aims to understand how non-medical healthcare personnel perceive these aspects in intensive care units.

**Methodology:** For the research investigation, a qualitative research method was chosen. Data collection involved semi-structured interviews with healthcare personnel from intensive care units. The obtained data were categorized using open coding after thorough analysis and anonymization. The results are presented using an undirected graph. The research section also includes continuous text containing individual codes and categories, supplemented with respondent quotes.

**Results:** Healthcare personnel have some awareness of what advance directive mean, but more detailed information is lacking, especially regarding legal requirements, document content, validity, and format. A critical question revolves around the actual adherence to advance directive in medical practice, which is often complicated by the document's challenging accessibility. Respondents generally agree that if they encountered a valid advance directive from a patient in their medical practice, they would respect the patient's preference.

**Conclusion and Recommendations:** For advance directive to be respected in medical practice, healthcare personnel must have sufficient information and knowledge. The broader public should also be informed about this concept. Additionally, improving the document's accessibility plays a significant role in ensuring adherence. The insights gained from this research can inform procedural and legislative changes, potentially leading to the establishment of a central registry for documenting advance directive in healthcare practice.

**Keywords:** *ethics, medical law, advance directive, cardiopulmonary resuscitation, do not resuscitate, limitation of therapy, intensive care, patient autonomy*