



Advance Directives?

Living Wills?

POLSTs?

Powers of Attorney?

How to Prepare for Your Care

What Are All These Things?

These documents are written legal instructions regarding your preferences for medical care if you are unable to speak for yourself. *At any age a medical emergency could leave you too ill or incapacitated to make your own healthcare decisions.* By planning ahead, you can outline the medical steps you do & do not want taken & relieve others from having to make those decisions for you during a medical crisis.

You will have to invest some time to really examine what actions you want taken on your behalf. Review your advance directive with your primary care provider (PCP) & the health care agent you have designated (through power of attorney) to be sure the forms are complete & you have made your wishes clear. When you are done, do the following:

- ◇ Keep the originals in a safe but easily accessible place.
- ◇ Give a copy to your PCP **&** your local hospital so your wishes will be on file with both facilities.
- ◇ Give a copy to your designated health care agent & any alternate agents.
- ◇ Keep a record of who has your advance directives.
- ◇ Talk with family members & other important people in your life about your advance directives & your health care instructions. By having these conversations now, you can help ensure that your family members clearly understand your wishes. Understanding your preferences can help your loved ones avoid conflict & feelings of guilt.
- ◇ Carry a wallet-sized card that indicates you have advance directives, identifies your health care agent, & states where a copy of your directives can be found.
- ◇ Keep a copy with you when you are traveling.

You can change your directives at any time by creating new ones, distributing the new copies, & destroying all old copies. Consider reviewing your directives if you change your marital status, receive a life-changing diagnosis, or if there's a change in who you want to hold your medical power of attorney. Review your directives every year to make sure they still reflect your current values and wishes. Life's circumstances can change quickly as you grow older.

Advance Directive:

An Advance Directive allows you to plan your medical treatment in advance should there ever come a time when you are unable to express your personal health care wishes. This document will guide choices for doctors & caregivers if you're terminally ill, seriously injured, in a coma, in the late stages of dementia, or near the end of life.

Advance Directives aren't just for older adults. Unexpected end-of-life situations can happen at any age, so it's important for all adults to prepare these documents.

Living Will:

A Living Will spells out medical treatments you would & would not want to be used to keep you alive. It also details your preferences for other medical decisions, such as pain management or organ donation. You will need to consider a number of possible end-of-life care decisions, such as CPR (resuscitation), mechanical ventilation (intubation), IV fluids, tube feeding, blood transfusion, & kidney dialysis.

DNR / DNI:

DNR means Do Not Resuscitate & DNI means Do Not Intubate. Tell your doctor about your preferences so they can write the order(s) into your medical record. These orders should be established each time you are admitted to a new hospital or health care facility.

Medical Power of Attorney:

A medical or health care power of attorney legally appoints someone to act as your health care proxy to make medical decisions for you **only** when you are unable to do so.

Financial Power of Attorney:

A financial power of attorney legally appoints someone to handle your financial affairs on your behalf **only** if you become incapacitated. This form should be set up by an attorney to insure it covers as much or as little authority as you want your financial agent to have.

POLST:

POLST stands for Provider Orders for Life-Sustaining Treatment. A POLST is provider-ordered instructions to ensure that in case of an emergency you receive the treatment you prefer. POLSTs detail your end-of-life care wishes & are intended for patients considered at risk for a life-threatening clinical event due to a serious life-limiting medical condition. This form does not replace your other directives.

If your heart or breathing stop, EMTs & other emergency medical professionals are required to carry out certain life-sustaining treatments, such as CPR. A POLST outlines details regarding unwanted treatments, under what conditions certain treatments can be used, how long treatments may be used, & when treatments should be withdrawn. Your provider will fill out the POLST based on your discussions with them about the likely course of your illness, your treatment preferences, & the contents of your advance directives.

This document stays with you, posted near your bed, in a medical or care facility. At home, the POLST should be placed where emergency medical personnel will easily see it, such as on your refrigerator or posted inside by your front door.

Some Other Stuff You Should Know About

Palliative Care: Palliative care's mission is to relieve suffering & improve quality of life for people with serious or life-threatening illnesses & their caregivers. This can include pain management, symptom control, treatment choices, & support for emotional, practical & spiritual needs.

Hospice: Hospice care is end-of-life care when curative treatment is no longer an option. The comprehensive comfort care of hospice can be provided in any setting—home, care facilities, or hospitals. Support services continue to be available to family members after patients have passed.

Most of the forms referred to above can be downloaded from the internet & printed out for your use. Some forms may be available from your PCP. Your provider can help you understand & think through your choices before you put them in writing. Talk with them for more information on any of these forms.