

Advance Directives for Health Care



Introduction

Advance Directives reflect decisions – in advance – about what kind of health care and treatments you want to have. These instructions about what you want or do not want go into effect ONLY if you are no longer able to make decisions or communicate your wishes yourself. While no one is required to prepare advance directives, hospice supports your right to make the treatment choices that are right for you.

In the state of Florida, there are two basic types of Advance Directives – the Living Will and Designation of Health Care Surrogate.

Living Will

- A document that tells others what kind of medical treatment you do or do not want to receive – it makes your wishes about medical care and treatment known.
- Should be discussed with your family, friends, clergy, and a physician.
- Goes into effect only if you are no longer able to make decisions or communicate your wishes yourself and when you are diagnosed as having:
 - A terminal condition from which there is no reasonable chance of recovery, or
 - An irreversible end-stage condition that has resulted in permanent and severe deterioration, or
 - A persistently unconscious state or irreversible condition with no ability to communicate purposefully and in which thought and awareness of yourself and your environment are absent.

Designation of Health Care Surrogate

- States that you authorize another person to make medical decisions, based on your desires, in the event that you are not capable of doing so.
- May include specific instructions based on your particular medical conditions.
- Goes into effect if and only if you are unable to communicate your wishes yourself.
- If a situation you did not cover in this document or in your living will occurs, your proxy will be asked to make the decision for you.
- The person you designate as your Health Care Proxy can:
 - Give informed consent (for surgery for instance).
 - Review your medical records.
 - Talk to your physicians and health care providers about your



- condition.
- Authorize your transfer to different health care facilities.
- Apply for public health care benefits.
- Consent to organ and tissue donation according to your wishes.
- The best person to select as your Health Care Proxy is a competent adult who knows and respects your values, religious beliefs and preferences regarding medical treatment.
- You may want to list alternate names as well in case your first choice becomes unable or unwilling to carry out your wishes.
- Let your Health Care Proxy(s) know you have chosen them.

Making Decisions About CPR

CPR includes a series of emergency procedures used when breathing stops and/or the heart stops beating. When the heart stops, chest compressions are delivered by hand until emergency personnel or medical staff can use electrode paddles to “shock” the heart. Intravenous medications are also used to help stabilize the heart’s rhythm. If these initial attempts are successful in restarting the heart but breathing does not resume, a ventilator may be used to continue delivering oxygen.

You can choose whether or not you would want to receive CPR. While CPR can be a life-saving intervention for some, studies have shown that it is rarely effective for persons who have advanced illness. If you have questions about the use of CPR in your situation, ask your care team and physician to explain the procedure in detail and to outline the potential risks and benefits.

DNR

Many people are not familiar with the term DNR. DNR means “Do Not Resuscitate.” DNR means that when breathing stops and/or the heart stops beating, you do not wish to receive cardiopulmonary resuscitation (CPR). If that is your preference, you – or your health care proxy - can communicate that to your care team and health care providers by signing a DNR form at any time.

- Tells your caregivers, hospice team, and other health care providers that you do not wish to receive CPR.
- Must be witnessed by 2 witnesses (age 18 or over) who are not related to you and are not in your will.
- Is a bright yellow form.
- The original form should be somewhere that it can be easily seen by EMS staff in an emergency (on the front of the refrigerator or above your bed).
- Health care regulations vary state to state- check with your health care team.



Developing Advance Directives That Reflect Your Wishes

- Talk to your family, friends, clergy, doctor, and hospice care team about your wishes and values.
- Complete a Living Will and a Health Care Proxy form. Hospice can provide you with forms at any time. Have two valid witnesses sign the forms. Follow the instruction on the forms about who can sign as witnesses.
- Decide whether or not you would want CPR if you were to stop breathing and/or your heart stops beating. If do not want CPR to be performed, complete a DNR form.
- Place your original, signed documents in an accessible place, not in a safety deposit box or inaccessible location. Give copies to your hospice care team, family, health care surrogates, lawyer, clergy, doctor, etc. Ask your doctor and any hospital or other health care organization to place a copy of your advance directives inside your medical file.
- Bring copies with you whenever you seek hospital treatment.
- You can cancel your Advance Directives at any time by simply destroying the documents. You can change your Advance Directives by completing new documents and destroying the old.

