Healthcare Choices: Your Guide to Establishing Final Wishes

It is our goal at JRMC to provide quality of life through the best care possible. However, determining the best quality of life can often be difficult as it heavily relies on personal preferences.

JRMC would like to help you as well as your family and loved ones:

1. Establish your preferences
2. Facilitate a discussion with your physician
3. Protect your medical rights

During the last stages of life, lives are often disruptive as patients are transferred to and from hospitals, leaving their home or nursing homes. It is important that each person be informed and decides what level of care they wish to receive. Unwanted medical care is an unnecessary financial burden and a disheartening situation for the patient and the family.

Determine Your Personal Preferences

When considering your plan of care during your final months, weeks, days, it is helpful to ask yourself the following questions: What would you want if you could not be physically and/or mentally independent? Where would you like to be when you die? The comfort of home or the medical attention of a hospital?

If terminally ill, would you prefer to receive palliative care for comfort or do you wish to receive life-sustaining treatment such as CPR, ventilators, or a feeding tube? Answering these questions may be difficult. A physician can help clarify your medical concerns. Understanding the treatment available and potential outcomes can make it easier to decide the level of care you would want.

GLOSSARY OF TERMS

**Advance medical directive** – A written legal document that allows a person to give instructions regarding medical care if he/she is unable to speak for him/her due to a terminal illness or a permanent unconscious state.

**Cardiopulmonary resuscitation (CPR)** – Group of treatments used when someone’s heart and/or breathing stops. CPR is used in an attempt to restart the heart and breathing. It could consist of mouth-to-mouth breathing or it can include pressing on the chest to mimic the heart’s function and cause blood to circulate. Electric shocks and drugs are also frequently used to stimulate the heart.
**Durable power of attorney** – A type of advance medical directive that allows someone to appoint in writing a person to make medical decisions on their behalf, without the authority to make decisions regarding life-sustaining treatments.

**Feeding tube** – Also known as artificial or assisted nutrition, a feeding tube is a tube that goes directly into your stomach, upper intestine, or intravenously (through the vein) to provide nutrition or hydration supplements when a person is unable to swallow on their own.

**Life-sustaining treatment** – Medical procedures that replace or support an essential body function including CPR, ventilation, feeding tubes, dialysis, and other treatments.

**Living Will** – A type of advance medical directive that provides a written declaration of a person’s wishes regarding medical treatments should the person become terminally ill.

**Palliative Care** – A comprehensive approach to treating serious illness that focuses on the physical, psychological, spiritual, and existential needs of the patient. Rather than sustaining life, its goal is to achieve the best quality of life available to the patient by relieving suffering, and controlling pain and symptoms.

**Terminally Ill** – A term used to describe someone with a fatal medical condition and/or is considered to have six months or less to live.

**Ventilator** – Also known as a respirator, a machine that pushes air into the lungs through a tube placed in the trachea. Ventilators are used when a person cannot breathe on their own.

**Don’t Keep Your Advance Medical Directive a Secret**

At this point, you have faced tough decisions, determined your preferences, and expressed your wishes in a legal document. However, if no one knows you have gone through this process, your wishes may not be realized. It is important to take the time to notify your family, friends and physician. This not only makes them aware, but opens the opportunity to further discuss details of your preferences.

**At a minimum, you should do the following after completing your advance medical directive:**

- Provide your physician with a copy.
- Talk with family and friends that will be involved in your care.
- If you named someone as your healthcare proxy or durable power of attorney, you should notify that person and provide them a copy of the appropriate document.
It is also recommended to do the following:
Keep a list of people who have a copy. If you ever change your mind or want to make changes, you can contact these people and notify them of the change.

Keep a card in your wallet stating that you have an advance medical directive and provide the location of that document.

Keep a copy of the document by your bed or in a prominent area that emergency teams will notice.

What Do I Do If I Change My Mind?
You can change your mind at any time. If you decide you do not want to have an advance medical directive, simply destroy all copies. Be sure to notify any family, friends, physicians that have a copy and ask them to destroy their copies as well. If you still want an advance medical directive, but would like to make changes, simply complete another document and destroy old copies. If both copies are found, the document with the most recent date is the legal one that will be followed.

Advance Medical Directives
This is a legal document that allows you to specify which life-sustaining treatments you wish to have or not have. Advance medical directives can also allow you to appoint a person to speak for you concerning your medical care if you are unable to do so. There are three types of directives in Arkansas.

1. Living Will. This is a written declaration explaining your medical wishes should you become terminally ill (6 months or less to live).

2. Durable Power of Attorney. A document to appoint in writing a person to make medical decisions for you, should you become unable to speak for yourself. This person does not have the authority to make decisions regarding end-of-life treatment.

3. Healthcare Proxy. A document to appoint in writing a person to make decisions regarding life-sustaining treatment should you become permanently unconscious or terminally ill and unable to speak for yourself.

It is important to note that in Arkansas, the living will and healthcare proxy only have authority if you become permanently unconscious or terminally ill and unable to speak for yourself. Also note that if you wish, the healthcare proxy and the durable power of attorney may be the same person. When completing an advance directive, you must have your wishes in writing. However, it can be in your own words or with the help of a form. Should you decide to write your own documents, it
is important that the document be clearly legible and easy to interpret. Any advance directive must contain your signature and date. Also required are the date and signature of two adult witnesses to show you voluntarily signed the document. Without these three signatures, the document is not valid.

**Who Should Consider Advance Medical Directives?**

Under Arkansas law, any person of "sound mind" who is at least 18 years of age can create a valid advance directive. Certainly the terminally ill should begin to evaluate their preferences and establish a plan. In addition, anyone under assisted living is encouraged to take advance medical directives under consideration. However, assessing end-of-life care is advantageous for people of all ages and abilities. Illness and accidents affect people of all walks of life. Families are comforted during tragic times knowing without doubt your documented preferences are being met. An advance directive can be a gift to a family who is relieved of the burden of having to decide for you.

For more information: JRMC Chaplain 541-7167 or Social Worker 541-7180.