

Patient Information About Advance Directives

WHAT IS AN “ADVANCE DIRECTIVE”?

An Advance Directive is a piece of paper or document you create in “advance” to make sure your wishes are followed if you become mentally or physically unable to make medical decisions yourself.

HOW MANY KINDS OF ADVANCE DIRECTIVE ARE THERE?

- 1) A “**Directive to Physicians**” is a written document in which you are requesting and directing that you do not want any heroic medical care that might prolong your life. You would be allowing the withholding or withdrawal of potentially life-sustaining medical care such as cardio-pulmonary resuscitation (CPR), artificial mechanical ventilation (breathing machine), or dialysis. Types of “Directives to Physicians” include a “Living Will” and a “Do Not Resuscitate (DNR) Order.”
- 2) A “**Durable Power of Attorney for Health Care**” (DPAHC), is a written document in which you name a person you trust (such as your wife or husband, relative, or friend) to make medical decisions for you, ONLY if you are unable to do so yourself. You would not be giving that person control of anything other than your healthcare. You may name a second person as an Alternate DPAHC, should your first choice be unwilling or unable, for whatever reason, to make medical decisions for you.

WHAT KINDS OF HEALTH CARE DECISIONS ARE LIKELY TO BE CONSIDERED?

You will determine in your “**Directive to Physicians**” (“**Living Will**” and/or “**DNR Order**”) Advance Directive whether you receive all treatments, selected treatments, or only treatments to keep you comfortable. Examples include but are not limited to what will be done to you should you stop breathing or should your heart stop beating: – 1) will resuscitation be attempted in the form of chest compressions, a tube placed in your nose, mouth, and/or throat, and electric shocks applied, 2) will artificial breathing machines be used, 3) will artificial kidney machines be used for dialysis, 4) will blood transfusions be performed, 5) will you be transferred to an intensive care unit, 6) will artificial food or fluids be given through a tube into your stomach or into your veins, and 7) will other tests, procedures, or medication treatments, which could potentially have significant side effects be used?

WHY CAN’T MY DOCTOR JUST MAKE MY HEALTH CARE DECISION FOR ME?

Your doctor needs to understand your values and wishes. Some people choose to not be given or to stop heroic treatments, if the chance of getting better is small. Other people choose to get potentially life-prolonging treatment even if such treatment may cause suffering, may not work or may leave them alive, but brain-dead.

WHY SHOULD I WANT AN ADVANCE DIRECTIVE?

An Advance Directive document protects your rights by letting you decide and control how your medical care decisions are to be made if you become unable to make them. Having this legal document will help your physician know how to carry out your wishes.

HOW SHOULD I MAKE MY DECISIONS ON WHETHER TO ACCEPT THESE VARIOUS TREATMENTS?

You should use your values and what is important to you; for example, avoiding pain and suffering, enjoying the company of friends and loved ones, or the avoidance of being a burden to your family. Imagine yourself in a coma, with permanent brain damage or terminally ill – and then ask yourself if it is important to you to prolong life regardless of pain, chances of recovery, or emotional burden to your family. You should discuss this with your family or friend(s) as well as your doctor.

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DO I HAVE TO CREATE AN ADVANCE DIRECTIVE?

No. The choice is completely up to you. There is no penalty should you decide not to create such a document.

DO I HAVE TO DECIDE RIGHT AWAY?

No. You should consider these options when you have time to think. You might want to discuss them with your family and/or friends.

WHO CAN HELP ME COMPLETE THE PAPERWORK NECESSARY TO CREATE AN ADVANCE DIRECTIVE?

Discuss your decision with your physician. A nurse, social worker, or chaplain can help you complete the paperwork.

WHAT INFORMATION DO I NEED TO GIVE TO COMPLETE THE ADVANCE DIRECTIVE PAPERWORK?

Only your own name, address, and social security number, are needed to complete a “**Directive to Physicians**”, “**Living Will**” and/or “**DNR Order.**” If you want a “**Durable Power of Attorney for Health Care**” (DPAHC), you will also need the names, addresses, and phone numbers of those you choose to be your DPAHC and the Alternate DPAHC.

WHO CAN CREATE AN ADVANCE DIRECTIVE?

Anyone who is over the age of 18 years, is of sound mind and is capable of making their own decisions (possesses decision-making capacity) can complete any or all of the Advance Directives.

WHO CAN SERVE AS WITNESSES TO MY SIGNATURE?

Two adults, who are of sound mind and capable of making decisions, can witness your signature. One of these witnesses must not be the physician, nurse, another offender, an heir or a relative by blood or marriage. A witness may be a security officer, chaplain, or other person not directly involved in providing you medical care.

DOES THE DIRECTIVE HAVE TO BE NOTARIZED?

No. Two witnesses are sufficient to document your signature. The Texas Department of State Health Services Standard Out-Of-Hospital Do-Not-Resuscitate Order does not have to be notarized, but may be notarized instead of having two witnesses.

DO I NEED A LAWYER?

No. There is no requirement to consult with a lawyer. However, you may discuss your Advance Directive decisions with anyone whose opinion you value.

ONCE I CREATE AN ADVANCE DIRECTIVE, WHAT DO I DO WITH IT?

You should give the Advance Directive to your physician or nurse who will make sure that a copy is placed in your medical record. You should ask for the original to be returned to you to keep with your property. You should also consider giving a copy to the person you would want to make medical decisions for you, should you become unable to make medical decisions. If you have completed a “**Durable Power of Attorney for Health Care**” (DPAHC) naming a substitute or “surrogate” decision-maker, then that person should receive a copy.

WHEN DOES AN ADVANCE DIRECTIVE TAKE EFFECT?

I-71.2 Attachment C

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The Advance Directive takes effect **ONLY** *when you cannot make decisions for yourself*, such as should you be in a permanent coma or suffer irreversible brain damage or be terminally ill with no chance of recovery as attested to by two physicians.

SO, I CAN STILL MAKE MEDICAL DECISIONS EVEN AFTER COMPLETING AN ADVANCE DIRECTIVE?

Yes. The Advance Directive is **ONLY** used *when you are not able to express your own choices*.

CAN MY FAMILY GO AGAINST MY WISHES?

No. The Advance Directive you prepare now will speak for you to guide your physician in the event that you cannot speak for yourself. If you have chosen a person to speak for you, then that person will make medical decisions for you.

WHAT IF I CHANGE MY MIND?

You can cancel the Advance Directive at any time by simply telling your physician or a nurse that you no longer wish to have an Advance Directive. The Advance Directive will be marked as “VOID” and made inactive in your medical record. If you want to change any of your treatment choices, you must complete a brand new Advance Directive. Any copies of the old Advance Directive should be located and destroyed.

WHO CAN I CONTACT FOR MORE INFORMATION OR TO ASK QUESTIONS?

The physician, nurse, or social worker caring for you can answer the questions you might have about Advance Directives. If they cannot, they will contact someone who can and get back to you with an answer.