



TYPES OF ADVANCED DIRECTIVES

The most common types of advanced directives are the living will and the durable power of attorney for health care.

THE LIVING WILL

The living will is a legal document that describes the treatments or procedures that you want if you become seriously ill and are not able to make decisions about your health care. It also describes any procedure that you do not want.

The living will is only used if you are at the end of your life or are unconscious and unlikely to wake up again. It can describe when attempts to prolong life should be started or stopped. This applies to treatments such as dialysis, tube feedings, or life support (such as the use of breathing machines).

Before your living will can be used to guide medical decisions, two physicians must confirm you are unable to make your own medical decisions. You must also have a medical condition that is specified by your state law as a terminal illness or permanent unconsciousness.

WHAT SHOULD I INCLUDE IN MY LIVING WILL?

- If you want equipment such as dialysis machines (kidney machines) or ventilators (breathing machines) to keep you alive.
- Do not resuscitate orders (instructions not to use cardiopulmonary resuscitation (CPR) if you stop breathing and your heartbeat can't be felt).
- If you want fluid (usually by IV) or food through a feeding tube if you can't eat or drink.
- If you want to be treated for pain, nausea, or other symptoms (palliative or comfort care), even if you don't want treatments to extend your life.
- If you want to donate your organs or other body tissues after death.

Choosing not to have aggressive medical treatment is different from refusing all medical care. A person can still get antibiotics, food, pain medicines, or other treatments. It is just that the goal becomes comfort rather than cure.

DURABLE POWER OF ATTORNEY FOR HEALTH CARE

A durable power of attorney for health care is also known as a medical power of attorney. It is a legal document in which you name a person you trust to make decisions about your care if you cannot. This person might also be called your health care proxy, agent, or representative.

Before a durable power of attorney can be used to guide medical decisions, your physician must confirm that you cannot make your own medical decisions. At that point, your proxy can speak with your health care team on your behalf and make decisions according to your wishes.

If your wishes in a certain situation are not known, your proxy will make decisions based on what they think you would want. If you become able to make your own medical decisions again, your proxy can't continue to make medical decisions for you.

WHO SHOULD I CHOOSE FOR MY HEALTH CARE PROXY?

Your health care proxy should be at least 18 years of age and:

- Someone you trust and who knows you well
- Willing to talk about your wishes ahead of time
- Willing to speak up for you in the future, even if it is difficult
- Someone who respects your wishes even if they have different opinions
- Able to come to your home, hospital, or care facility

There might be times when your proxy needs to handle a disagreement. For example, a family member might disagree with your health care provider, like a doctor, nurse practitioner, or physician assistant. In that case, your proxy will need to discuss your wishes with those who disagree.



POLST (PHYSICIAN ORDERS FOR LIFE-SUSTAINING TREATMENT)

A POLST is a medical order that outlines the type of medical care you would like in an emergency. It gives more detailed information about your wishes than a do not resuscitate (DNR) order.

A POLST must be filled out with the help of a health care professional who must then sign it. You can indicate in a POLST if you want:

- Full treatment. The health care team will use all effective treatments to try to keep you alive. This includes medical and surgical treatments, intensive care, and a breathing machine (ventilator) if needed.
- Select treatment. The health care team will attempt to restore function but avoid intensive care and many resuscitation efforts. You might be sent to a hospital.
- Comfort-focused treatment. The health care team will make you feel as comfortable as possible and allow a natural death. You will only be sent to a hospital if they can't make you comfortable where you are.

On the POLST form, you can also tell the health care team if you want CPR and tube feeding to give you food.

In the United States, the POLST form you should use depends on your state. They may be called something else, depending on where you live. You can find a list of the POLST program names on the National POLST website.

Emergency personnel, like paramedics and EMTs (Emergency Medical Technicians) can't adhere to an advance directive but they can use a POLST form. Without a POLST form, emergency personnel are required to provide every possible treatment to help keep you alive.



DO NOT RESUSCITATE (DNR) ORDERS

Resuscitation means health care staff will try to re-start your heart and breathing using methods called cardiopulmonary resuscitation (CPR) and defibrillators. In some cases, they may also use life-sustaining devices such as breathing machines.

IN THE HOSPITAL

A Do Not Resuscitate or DNR order means that if you stop breathing or your heart stops, nothing will be done to try to keep you alive. If you are in the hospital, you can ask your health care provider to add a DNR order to your medical record. You would only ask for this if you don't want the hospital staff to try to revive you if your heart or breathing stopped.

Some hospitals require a new DNR order each time you are admitted, so you might need to ask every time you're admitted to a hospital. But remember that this DNR order is only good while you are in the hospital. It doesn't work outside the hospital.

OUTSIDE THE HOSPITAL

If you would like a DNR order that works outside the hospital, talk with your health care provider. The state of Nebraska requires the form must be signed by the patient (or legal representative/POA) and a licensed physician in the presence of a notary or witness.

Give copies to your doctor, hospital and key family members, and keep the original in a visible place in your home (ie on the refrigerator). Also, you may consider wearing a DNR bracelet or necklace if you are in the community to ensure it is seen by first responders.

A non-hospital DNR is intended for Emergency medical Service (EMS) teams. Unless you have a valid and visible DNR order, the EMS teams who answer 911 calls are required to try to revive and prolong your life in every way they can.

