

# Advance Directives: 101

End of Life Decisions

# Learning Outcome:

- Participants will report an increase in knowledge of Advanced Directives and identify skills they need to discuss options with patients who do not yet have Advance Directives.

# *The Lady and the Reaper*

- Please view video below
- <http://vimeo.com/9985840>



# Informed Consent

- Fundamental aspect in both law and ethics
  - Patients have the right to receive information about treatment
  - Successful communication through patient-physician relationship is key
  - In seeking the informed consent, the physician should:
    1. Assess the patient's ability to understand medical information
    2. Present the relevant information stated below sensitively and accurately
      - The diagnosis
      - Nature and purpose of the recommended interventions
      - Burdens, risks, benefits of all options (including forgoing treatment)
    3. Document the informed consent conversation and patient's decision
- \*Informed consent should be placed in medical record\***

# Assessing Decision Making Capacity

- To be deemed to have decisional capacity by the physician, the patient must be able to:
    - Receive information
    - Manipulate, deliberate, and evaluate information
    - Communicate treatment preference
  - Physicians need to review the patients:
    - Understanding
    - Logic
    - Consistency
- \*Decision making capacity is dependent on time and task specific\***

# Surrogate Decision Makers

- Individuals who have the authority to make health care decisions for a loved one when that loved one has lost their decisional capacity.
- Most state provisions focus on 4 areas pertaining to surrogate decision-making:
  - The standards for decision-making
  - Limitations on types of decisions the surrogate is empowered to make
  - The process for resolving disputes between equal priority surrogates
  - The priority of surrogates that may legally act in absence of an appointed guardian or agent with health care powers
- Surrogate decision maker hierarchy featured on next slide

# Surrogate Decision Makers: Ohio

State & Citation	General Type of Statute	Can Patient orally name a Surrogate?	Priority of Surrogates (in absence of an appointed agent, surrogate, or guardian with health powers)	Limitations on Types of Decisions	Provides Standard for Decision-Making	Disagreement Process Among Equal Priority Surrogates
<b>36. OHIO</b>  Ohio Rev. Code Ann. §2133.01 to .16 (West 2017) Specifically, see §2133.08	Living Will Statute		<ul style="list-style-type: none"> <li>• Spouse</li> <li>• Adult child</li> <li>• Parents</li> <li>• Adult sibling</li> <li>• Nearest adult relative</li> </ul>	Limited to consent for withdrawal or withholding of life-sustaining treatment, and patient has been in terminal condition or permanently unconscious for at least 12 months.  Nutrition and hydration may be withheld <b>only</b> upon the issuance of an order of the probate court, §2133.09  Pregnancy limitation, §2133.08(G)	Yes §2133.08(D)(3)	Majority rule for adult children and siblings  Judicial recourse not addressed

# What are Advance Directives?

“Advance directives are documents to direct medical care when a patient is unable to communicate their own wishes due to a medical condition.” –Ohio Hospital Association



# Advance Directives

- In Ohio, the following types of advance directives are authorized by state law:
  - Do not resuscitate orders
  - Living wills
  - Organ donation
  - Durable powers of attorney

# Advance Directive Options

- Code Status
  - Full code: All resuscitation procedures will be provided by the process of chest compressions, intubation, and defibrillation (CPR).
  - DNRCC-Arrest: A patient will receive all of the appropriate medical treatment, until the heart has stopped beating or breathing has stopped. Comfort care provided.
  - DNRCC: A patient chooses other measures to correct abnormal heart rhythms, such as medication. Comfort care or other requested treatment is provided at a point before the heart or the breathing stops. Comfort Care is also known as palliative care or symptom management, which involves keeping the patient comfortable with palliative care and providing pain medication. This code status **does not mean “do not treat.”**

# Advance Directive Options

- Living Will
  - A legal document to set forth your directions about the use or non-use of artificial life-sustaining support if permanently unconscious or terminally ill
  - Becomes effective when a person cannot communicate their wishes and are permanently unconscious or terminally ill
  - Can be revoked or changed by the person at any time, however it cannot be revoked or changed by anyone else
  - This document overrides the health care power of attorney
  - Important for all ages

# Advance Directive Options

- Health Care Power of Attorney

- A legal document that authorizes another person to obtain your health information to make health care decisions for you.
- Your agent can have your health information and communicate with your health provider at any time.
- Health care decisions can be made for you only if and when you yourself can no longer make health care decisions yourself.
- A health care power of attorney:
  - Is able to name an individual that you trust to make a variety of health care decisions at any time you cannot do so.
  - Requires that the person appointed make decisions that coincide with your wishes
  - Does not have the ability to overrule a living will if both documents are present

\*There are limits associated to the decisions that your health care power of attorney can make.\*

# Why are Advance Directives Important?

- No more than one third of all American adults have an advance care plan in writing.
- Roughly 70 percent of Americans will be unable to make decisions for themselves at some point in their lives.
- Health crises can happen to anyone at any time.

# Benefits of Advance Directives

- Minimizes stress
- Decreases potential conflicts between family members
- Allows your loved ones peace of mind
- With advance directives a person will avoid:
  - Unhelpful procedures
  - Unwanted hospitalization
  - Unnecessary pain

# End of Life Care

- The goal for good end-of-life care is to prevent physical and emotional suffering as much as possible
- Options exist for care
- No right answer or choice, however preferences can vary from person to person
- Resources on various options are available

# End of Life Care

“ Candid conversation is crucial to ensuring we get the care we want at the end of life, so it’s important to discuss priorities with loved ones, healthcare providers and others close to us.”

-Compassion and Choices



# References

<https://www.ohiohospitals.org/advance-directives>

<https://www.ama-assn.org/delivering-care/informed-consent>

<https://www.mypcnow.org/blank-v7dyv>

[https://www.americanbar.org/content/dam/aba/administrative/law\\_aging/2014\\_default\\_surrogate\\_consent\\_statutes.authcheckdam.pdf](https://www.americanbar.org/content/dam/aba/administrative/law_aging/2014_default_surrogate_consent_statutes.authcheckdam.pdf)

[https://www.americanbar.org/publications/bifocal/vol\\_36/issue\\_1\\_october2014/default\\_surrogate\\_consent\\_statutes.html](https://www.americanbar.org/publications/bifocal/vol_36/issue_1_october2014/default_surrogate_consent_statutes.html)

<https://www.munsonhealthcare.org/upload/docs/Advance%20Care%20Planning/6581.pdf>

<https://www.ohiobar.org/ForPublic/Resources/LawFactsPamphlets/Pages/LawFactsPamphlet-24.aspx>

<https://www.ohiobar.org/ForPublic/Resources/LawFactsPamphlets/Pages/lawfactspamphlet-13.aspx>

<http://www.ucirvinehealth.org/patients-visitors/advance-care-planning/benefits-of-advance-directives>

<https://www.compassionandchoices.org/your-end-of-life-options/>

# Thank you!

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