OSF Care Decisions®

ADVANCE CARE PLANNING INFORMATION

OSF® HEALTHCARE

WHAT IS OSF CARE DECISIONS?

OSF Care Decisions is a program that was developed by OSF HealthCare to help patients think about health care decisions that they may need to make in the future. This program supports the belief that everyone should be given the information they need to make future decisions based on their values and spiritual and religious beliefs.

What is advance care planning, and how is it different than just completing advance directives?

Advance care planning is much more than just completing advance directives. It means talking with your doctor and family about your current health condition and the care decisions you may need to face in the future. The best time to talk about this is before an illness becomes worse.

What should I talk to my doctor about to help me plan for my care in the future?

You should talk to your doctor about your current health condition and what care decisions your doctor thinks you may need to make as your condition changes over time. Then, when future treatment questions come up, your doctor should tell you about the benefits and burdens of treatment or no treatment in words you understand.

Should I bring my spouse or adult family member to the discussion with my doctor or OSF Care Decisions facilitator?

Yes. The most important part of advance care planning is the talk you have with your family and doctor. This will help provide them with the knowledge and confidence they need to make care decisions for you in the future if you are not able to make them yourself. If you already have a Power of Attorney for Health Care Agent (Illinois) or Durable Power of Attorney for Patient Advocate (Michigan) named, this would be the best person to bring with you.

How will advance care planning help me and my family?

Modern technology and new medications have been good for the treatment and cure of disease, but sometimes they can cause extra burden for little or no benefit when the disease is advanced and there is no cure. Advance care planning can help you and your family think about how you would want medical technology and medications used during these times based on your personal, religious and spiritual values.

What should I do with my advance directives once they are completed?

In addition to keeping a copy for yourself, give a copy to your Power of Attorney for Health Care Agent (Illinois) or Durable Power of Attorney for Patient Advocate (Michigan), your family members, pastor and doctor. The more you make your family and friends aware these documents exist, the greater likelihood they will be used when needed.

Can I change my mind about who I want as my Power of Attorney for Health Care Agent or Durable Power of Attorney for Patient Advocate?

Yes. You may change your mind at any time and sign new documents. If you do this, you should remember to have old copies destroyed and new copies distributed.

If I have a Power of Attorney for Health Care form filled out, will it stop me from being resuscitated if my breathing or heart stops when I am in the hospital?

No. A Power of Attorney for Health Care form is not the same as a Do Not Resuscitate (DNR) order.

Do health care providers have to follow my advance directives?

Yes, if they meet state law requirements and are not against the provider's ethical and religious standards for care. For example, a Catholic hospital will not agree to a directive like physician-assisted suicide.

What do the terms mean that are used when describing advance care planning and care options at the end of life?

See the following glossary for definitions of commonly used terms. If you still have questions, please ask your doctor or call an OSF Care Decisions facilitator.

Glossary

These definitions are meant to help you understand these terms. They are not legal or medical definitions, but general descriptions.

OSF Care Decisions: An advance care planning program to help patients plan for health care decisions they may need to make in the future. It includes using facilitators to help you identify what is important in your life and what your spiritual and religious beliefs and values are before making these decisions.

Advance care planning: A process of discussion that allows a person to think about their health care in the future. It considers the person's current health, along with their beliefs and values, and how their health may change in the future.

Advance directives: These are legal documents that allow you to spell out your decisions about end-of-life care ahead of time. They give you a way to tell your wishes to family, friends and health care professionals and to avoid confusion later on.

Power of Attorney for Health Care (Illinois) or Durable Power of Attorney for Health Care (Michigan): This is a legal document that allows you to appoint a person you know and trust as your Health Care Agent (Illinois) or Patient Advocate (Michigan) to make medical decisions for you if you become temporarily or permanently unable to make these decisions yourself.

Living will: This is a type of advance directive that only applies if you are terminally ill or permanently unconscious. It is very limited and typically only tells the doctor what you do not want. It is not the same as a DNR order.

DNR: Do Not Resuscitate. This is a legal order written either in the hospital or on a legal form and signed by the patient or their Health Care Agent directing the medical team to not perform CPR. For some patients with certain medical conditions, it is known in advance that CPR will not be successful or it may leave them worse off.

Practitioner Orders for Life-Sustaining Treatment (POLST) (Illinois): A medical order that documents the types of treatments, including CPR, a patient wants when they are seriously ill or at the end of life. It travels with the patient to assure that treatment preferences are honored across care settings.

Physician Orders for Scope or Treatment (POST) (Michigan): A medical order intended for patients with an advanced or serious illness who desire to specify their treatment preferences, including CPR.

Palliative care: Specialized medical care for people with serious illnesses. This type of care is focused on providing patients with relief from the symptoms, pain and stress of serious illness – whatever the diagnosis or treatment.

Surrogate agent: In Illinois, this is someone who is named to make decisions for another who has not completed a Power of Attorney for Health Care and cannot make decisions for themselves. This agent is usually a next-of-kin family member but can be a state-appointed person called a guardian. This practice is similar in Michigan although the term surrogate agent is not used, and if a family cannot agree on a decision, the health care provider may ask the court to appoint a guardian.

Hospice: Specialized health care for people of all ages who have a life-limiting illness, a doctor's prognosis of six months or less to live, and a goal of symptom management without life-prolonging or curative disease treatment.

Hydration: Giving fluids. This could be drinking by mouth or giving fluids by IV or other means such as feeding tubes.

Where do I get more advance care directive information and forms?

Illinois

You can get the state of Illinois advance directive information forms by going to:
www.idph.state.il.us/public/books/advin.htm

Michigan

You can get the state of Michigan advance directive information and forms by going to:
http://www.michigan.gov/miseniors

Other web sites with information about advance care planning:

http://www.osfhealthcare.org/supportive-care/
http://www.supportivecarecoalition.org/
www.chausa.org/advancedirective

Contact OSF HealthCare

Please feel free to contact OSF HealthCare with any questions or concerns you may have about OSF Care Decisions, advance care planning or palliative care services.
Call (309) 308-5950 or visit osfsupportivecare.org.

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