Increasing Completion of Advance Directives in the Primary Care Setting

What is an Advance Directive?

It is a legal document that allows you to give detailed instructions about your health care decisions, or to appoint another person (Health Care Agent) to make the decisions for you in the event that you cannot make decisions due to serious illness or injury. It assures that health care professionals will honor your preferences in treatment, and allows you to make your own decisions before an event may occur.

Who should fill this out?

Anyone years 18 or older should complete an advance directive while they are capable of understanding the outcomes of their health care decisions. It does not matter if you are healthy or sick at the time.

Do I need someone to help me complete the form?

The choices regarding your care should be completely your own, but speaking with your family and loved ones ahead of time can allow for your values and wishes to be shared and help them understand how to honor your choices. Also, your health care provider can walk you through the documents and explain what different types of treatments involve. You do not need a lawyer to complete the forms, and they can be held on file as part of your medical record.

Planning your care significantly decreases the stress placed on your family, friends and loved ones when a serious event occurs. Having a plan in place improves care overall and allows for family to focus on their loved one rather than worrying about medical decisions.[1]

Advance Directives

FAQs and information about planning End-of-Life care

What do I do after filling it out?

A copy should be given to your doctor, your Health Care Agent and anyone else you would like to have informed. The state of Vermont has a confidential registry that allows any health care provider in the state access to your AD when it might be necessary.

Can I ever change what I wrote?

Yes, if you complete a new form, it cancels out the older form. You can also tear up the document at any time and remove it from the medical record and/or registry. It is suggested to update an AD anually.

Does the form only refuse care?

No, the AD allows you to pick exactly what types of treatments you would like in addition to what you would not like.

Can I still make decisions ?

Yes, you must make your own medical decisions as long as you are capable and can communicate your choices. Your AD only is effective when you lack capacity to make decisions.

Where should I start in planning?

Step 1: Determine your Health Care Agent. This is a person who can make decisions on your behalf, so make sure you have shared your wishes with them. You can chose an alternative agent as well as choosing who you do *not* want making decisions for you.

Step 2: Complete an AD with your goal and priorities for health care treatment.

Step 3: Develop a COLST/DNR to make sure your limitation of treatments are respected across all care settings including in the community and hospital.

This seems like a difficult conversation to start. Are their resources I can use with my family and friends to open a discussion?

- www.advancecareplanning.ca/
  scroll to click on “You & Your Family”
- vtethicsnetwork.org/decisions.html
  here you can find copies of both the short and long AD forms as well as the health care agent and DNR forms

References:
1. Detering K.M., et. al. The impact of advance care planning on end of life care in elderly patients: randomised controlled trial BMJ 2010; 340 :c1345