



HEALTH CARE DECISION MAKING

Being an
Informed
Patient

Decisions

Quality

Responsibility



Saint Mary's
A member of CHW

Saint Mary's Philosophy Regarding Life Decisions

At Saint Mary's, we believe that birth, health, illness and death are all integral parts of the human life and are an opportunity to cooperate in the mystery of Life, Death and the Resurrection of Christ.

Dying is a natural part of life that should be made as comfortable as possible for the patient and should not be unnecessarily prolonged. Patients have a right to choose what will be done to care for them.

What has always been a part of our philosophy at Saint Mary's has been recognized by the state of Nevada as your legal right per NRS 449.535 to 449.690. As a result, all Saint Mary's patients will be provided information on Advance Directives: the directions that you give about the kind of health care you want to receive if you are ever in a situation, such as a coma, that does not allow you to communicate your wishes.

For example, you can provide information about your preference not to be kept alive by a respirator (breathing machine) if there is no chance you will recover to live a life of reasonable quality. You can also

give someone else the power to make this type of decision for you if you are unable to do so yourself.

This brochure has been designed to inform you about your rights to make decisions about your health care and to introduce you to the Catholic Philosophy of Prolonging Life Decisions. When you are admitted to Saint Mary's you will be asked if you have an Advance Directive—either a Declaration and Living Will, Durable Power of Attorney for health care, or both. Each of these is an Advance Directive: a document that tells your doctor, family and the hospital how you want to be treated if you are unable to communicate for yourself. A Declaration and Living Will is simply a statement of your desires regarding prolonging life. A Durable Power of Attorney designates someone to make decisions about your health care should you be unable to do so for yourself.

Declaration and Living Will and Durable Power of Attorney forms are available at Saint Mary's; however, Durable Power of Attorney forms should be reviewed with an attorney. Both of these Advance Directives will be honored by Saint Mary's.

What is the Catholic Philosophy on Making Decisions about Managing Life?

In taking care of the critically ill and dying, there are fundamental norms that underlie the care of such patients. These norms, which are listed below, serve as reminders of Christian values as we make difficult decisions.

- Life is a gift from God and we must take reasonable means to protect and preserve it.
- Death is a transition to union with God.
- We must assist one another to live well and to die well.

Informed Consent: Who Makes the Decision?

The primary decision-maker in life-prolonging decisions is the patient. The Declaration and Living Will or Durable Power of Attorney must be respected. If the patient does not have a Declaration and Living Will or Durable Power of Attorney and is unconscious or irrational and thus unable to make the decision, the responsibility falls on the family. Usually the family can be presumed to know

what the patient would want. If there is no next-of-kin, the decision would be made by the guardian. Such decisions must be based on the patient's best interest.

The Physician's Role in the Process

The physician's obligation is not to make the decision, but to present an accurate and careful diagnosis in language that is understandable to the decision-maker. Your physician will endeavor to describe the progress of the illness and its effect, and discuss the forms of treatment that are available, so the benefits of further treatment or non-treatment can be evaluated. It is the responsibility of the primary-care physician to document in the patient's chart the discussion that led to the decision to withhold treatment or withdraw treatment. The rationale for the decision should be included in the documentation.

Principle of Prolonging Life Decisions

No one is obliged to take disproportionate means to preserve life, such as means that are excessively burdensome or offer no reasonable hope of recovery. Proportionate means are those that do not impose

excessive physical, mental financial or spiritual burdens on the patient or the patient's family; a reasonable hope of recovery is expected. Each situation has its own individual circumstances and should be considered in that light. During and after the decision-making process, the patient must have ordinary nursing care to keep him as comfortable as possible.

Saint Mary's reserves the right to review patient situations, relative to artificial nutrition and hydration, on a case-by-case basis.

Two Extremes that Are Morally Unacceptable:

- Automatically doing everything medical science can do at any cost.
- Judging that an individual's life is no longer "worth living" and, as a result, abandoning the person or directly ending his/her life.

Communication

Communication is vital in the prolonging-life decision process. Information should be given to the patient in a clear yet compassionate manner. If a physician feels it is necessary to delegate the task of communication, it should be done by a nurse, a member of the family or a minister. Such delegation should be the exception as there is an ethical and legal obligation for the physician to discuss risks, benefits and complications.

When making these decisions, it is highly recommended that there be a team approach with the physician, nurse, family and other helpful individuals, such as the social worker or Chaplaincy Services representative. The hospital, too, has a moral and legal responsibility concerning such decisions. Saint Mary's Biomedical Ethics Committee is always available to assist in these matters and can be particularly useful when conflict exists among the parties or within the family itself; however, it is not the committee's purpose to act as the decision-maker.

Reference: Moral Responsibility in Prolonging Life Decisions: edited by Donald G. McCarthy, Ph.D., and Albert S. Moraczewski, O.P., Ph.D.; Pope John Center, St. Louis, MO, 63134.

What Does All This Mean to Me?

Saint Mary's philosophy is to honor patients' wishes regarding their care. You are responsible for indicating in writing your desires about your health care, and you have a right to make your own decisions or give someone else the power to make those decisions for you should you be unable to do so. By completing a Declaration and Living Will or Durable Power of Attorney, you in essence are controlling your own health care decisions.

Which is Better: A Declaration and Living Will or a Durable Power of Attorney?

Neither is better than the other; they are simply different in terms of what they do. You may want to consider having both—a Durable Power of Attorney to appoint someone to make your health care decisions should you be unable to do so, and a Declaration and Living Will to outline your wishes regarding health care you would or would not want.

Is a Declaration and Living Will Considered a Legal Document?

Most states have laws that recognize a Declaration and Living Will as being legal, and some states have Declaration and Living Will forms that you can use. In Nevada, a Declaration and Living Will is recognized as a legal document, and you can obtain a form from Saint Mary's or from the state. If you complete a Declaration and Living Will on the state's official form if and you spend part of the year in another state, it would be a good idea to complete one for the other state you live in. If, however, you travel extensively, it would not be practical for you to complete an Advance Directive for each state you travel through.

Does My Advance Directive Need to Be in Writing?

Whether you are completing a Declaration and Living Will or Durable Power of Attorney, it is best that you do it in writing. While there have been instances where patients' oral wishes were followed, having it in writing makes it more likely that your wishes will be respected and that your designated decision-maker represents you.

Can I Appoint Anyone to Make My Health Care Decisions in My Durable Power of Attorney?

You may appoint anyone you wish. Some people think you must appoint an attorney because of the term "power of attorney." It is sometimes confusing to appoint more than one person; however, an alternate may be named if your "power of attorney" is unable to perform his/her duties. You may also request that your designee consult with another person, such as a relative, before making decisions about your treatment.

What if the Person I Name as My Designee Dies Before I Do?

When writing your Durable Power of Attorney, it's best to name a second decision-maker in the event that the person you originally appointed dies before you do. This is especially important if you appoint your spouse, since you both could become incapacitated at the same time, such as in an accident.

Do I Need to Consult a Lawyer to Complete a Declaration and Living Will or Durable Power of Attorney?

No, this is not essential, but it may be a good idea, especially with a Durable Power of Attorney, since you may have legal questions that legal counsel can answer.

What Should I Put in My Advance Directive?

The most important thing for you to put in your Durable Power of Attorney is that you give the authority to your designee to make decisions about foregoing life-sustaining or prolonging treatments. You should also include your preference regarding specific treatments you would or would not want. One important preference to indicate is whether you would like to be kept alive through a feeding tube.

You must also be aware that if you are pregnant at the time you became incapacitated, and your physician is aware of your pregnancy, your Advance Directive is void during the course of your pregnancy.

Will the Doctor Immediately Disconnect Me from Machines if I Should Become Incapacitated?

It is very important that you are clear in your Advance Directive about specific circumstances under which you would or would not accept receiving those types of treatments. For example, some people object to being kept alive by machines if the machines would only prolong dying. If, however, those machines were only temporary and the person's health could be restored with a satisfactory quality of life, it would be acceptable to them to receive treatment.

Where Should I Keep My Advance Directive?

You should give a copy to your doctor, the person you named in your Durable Power of Attorney to make decisions for you, and to any other people who are likely to be present if you are ever critically ill, such as family members, close friends or your spiritual advisor (pastor).

This brochure contains Saint Mary's Regional Medical Center's policies pertaining to your rights as a patient to make decisions concerning your medical care, accept or refuse medical or surgical treatment, and formulate Advance Directives.

For complaints or grievances pertaining to hospital noncompliance with the state of Nevada Advance Directives requirements, contact:

**State of Nevada Bureau of
Licensure and Certification**
1550 East College Parkway, Suite 158
Carson City, NV 89706
775.687.4475

For more help with the legal issues relating to Advance Directives, call:

Senior Law Center.....775.328.2592
Washoe Legal Services.....775.329.2727



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