Getting Your Affairs in Order: Creating Peace of Mind

Glossary

**Advance Care Planning (ACP)** – A thoughtful process of planning for future medical care should you become unable to make your own decisions due to a life-limiting illness or injury. It involves education, reflection, communication and documentation. It is a valuable tool for families as they face difficult decisions about caring for you in your final phase of life. Studies show that families that engage in the ACP process have less stress, confusion and guilt about their decisions.

**Advance Directive** – A broad term that includes documents that allow you to give instructions in the event you can no longer make decisions due to illness or incapacity. (e.g. living will, designation of healthcare surrogate, durable power of attorney, etc.)

**Do Not Resuscitate (DNR) Order** – A medical order that instructs medical personnel to not use cardiopulmonary resuscitation (CPR) or ventilation if the person is not breathing or has no pulse after suffering cardiac or respiratory arrest.

**Guardian** – A person appointed by the court to be responsible for the care and management of another person whom the court has determined is no longer capable of making independent decisions.

**Healthcare Surrogate (HCS)** – An adult chosen to make healthcare decisions for an individual who is too sick or injured to make decisions for him/herself. The HCS makes decisions and takes actions based on what a patient would make or do if he or she were able.

**Incapacity** – A court determination concerning the ability of a person to make self-care or financial decisions. People are presumed to have capacity unless there is evidence to the contrary.

**Last Will and Testament (Will)** – A legal document that communicates how a person wishes personal assets and property to be passed on after death.

**Living Will** – A written or oral statement about how you want medical decisions made should you not be able to make them yourself.

**Terminal condition** – A disease or condition that cannot be cured or adequately treated and will result in death.

From: [http://empathchoicesforcare.org/planning-toolkit/](http://empathchoicesforcare.org/planning-toolkit/)
WHY YOU NEED A LIVING WILL

For anyone at any age, a health emergency or sudden illness can happen anytime. It’s part of life and the single most important reason why you should have a plan that makes your healthcare wishes known. What if you were hurt in an accident or became sick and could not make a decision about your own medical care?

Having a plan that makes your healthcare wishes known is the best way to make sure you get the kind of treatment you want.

MAKE YOUR WISHES KNOWN

1. Think about how you would like to be cared for in an emergency. Are there any medical treatments that you absolutely would or would not want to receive?

2. Think about your values. What is important to you? Do you have any special religious, cultural or personal beliefs that you want your healthcare team to know about?

3. Ask questions to find out if your loved ones are willing to honor your wishes. Explain to them why these choices are important to you.

4. When you have a plan and you share it with your loved ones, you give them a gift. You spare them the stress of deciding what is best for you, by giving them peace in knowing that they are honoring your wishes.

5. Share your thoughts and feelings with your family and friends. Be sure to include anyone that may play a part in your care, including all of your children. Families can be torn apart when caring for loved ones whose wishes are not known ahead of time.

CHOOSE A HEALTHCARE SURROGATE

The most important part of creating a plan is choosing someone to carry it out for you.

1. Would this person be willing to speak on my behalf?
2. Would this person be able to handle conflicting opinions from family members?
3. Would this person feel comfortable speaking with medical personnel?
4. Would this person be willing to honor my wishes even if he or she disagreed with them?

SUGGESTED QUESTIONS FOR YOUR HEALTHCARE PROVIDERS

1. “I am working on my living will and I would like to discuss my preferences for treatments. Will you help me understand what outcomes I can expect?”
2. “What are the benefits and burdens of the treatments I have chosen?”
3. “Will you honor my choices? Do you have any recommendations?”
4. “Are there any alternative treatments or options you can share with me?”
5. “What happens if I am in a lot of pain or discomfort?”
6. “Can we talk about my wishes for hospice care?”