YOUR RIGHT TO MAKE DECISIONS AFFECTING YOUR CARE

Grand View Hospital honors your right to make decisions regarding your health care. We encourage you to think in advance about what treatment you would accept or refuse if you had an end-stage medical condition or became permanently unconscious, and could not express your wishes. (Please see definitions on the back of this brochure.) One way to make sure your wishes would be followed in such an event is to have written instructions, called advance health-care directives, that explain what kind of treatment you would want. Three types of advance health-care directives related to health-care choices are recognized in Pennsylvania: living wills; power of attorney for health-care decisions; and combination documents. They are legal documents that enable health-care personnel to obtain information about your wishes should you not be able to communicate. Usually, they are written in advance of serious illness and state your choices for health care, or name someone to make those choices if you become unable to make decisions.

TYPES OF ADVANCE HEALTH-CARE DIRECTIVES IN PENNSYLVANIA

1. Living Will
A legal paper that spells out the kind of life-prolonging medical care you would want—or would not want—if you had an end-stage medical condition or became permanently unconscious and unable to make your own decisions.

2. Power of Attorney for Health-Care Decisions
A signed and dated document that gives another person the legal right to make decisions regarding your health care if you are not able to make such decisions yourself. This person will have access to your medical records.

3. Combination Document
A document that incorporates features of both a living will and a health-care power of attorney.

You may revoke an advance directive at any time. Any changes or revocations should be signed and dated and you should give copies to your family and doctor.
ADVANCE HEALTH-CARE DIRECTIVES GO INTO EFFECT ONLY UNDER CERTAIN CONDITIONS

It is important to know that an advance health-care directive goes into effect when you are in our hospital only if Grand View has a copy of it. Please bring a copy of your advance health-care directive with you every time you are admitted to Grand View. Also, give copies of your advance health-care directive to your doctor and loved ones so your wishes would be known should you be admitted to the hospital unexpectedly.

Additionally, for a living will to go into effect:
- Your doctor must determine that you have a terminal medical condition or are in a state of permanent unconsciousness.
- Your doctor must determine that you are incompetent to make medical decisions.

A power of attorney for health-care decisions goes into effect only when you are unable to make health-care decisions for yourself. Conditions that might prevent you from being able to make decisions for yourself include the effects of anesthesia or other medication, a state of unconsciousness (either temporary or permanent) and serious illness or injury.

ADVANTAGES OF HAVING AN ADVANCE HEALTH-CARE DIRECTIVE

An advance health-care directive:
- Helps protect your right to make medical choices that can affect your life.
- Allows your family to know and understand your wishes.
- Gives physicians and other health-care workers involved in your care guidelines regarding the care you want to receive.
- Allows you to give special directions to your health-care providers on topics, such as pain relief.
- Enables you to indicate your desire to forego certain life-prolonging treatment, i.e., breathing machines, feeding tubes, or dialysis, when there is little or no chance of recovery.

GRAND VIEW’S RESPONSIBILITIES

Grand View and other health-care providers must provide necessary medical care to all individuals in their care. We are relieved of this duty only if we can show that the care goes against a person’s wishes. An advance health-care directive is one way we can show that we are following your instructions. Your decision to either have—or not have—an advance health-care directive in no way affects the care you receive at Grand View.

Federal law requires Grand View and other hospitals to ask you upon admission whether you have a living will. We will document your answer in your medical record. If you have an advance health-care directive, please bring a copy with you. At Grand View, your advance health-care directive is viewed as a statement of your wishes and is used by the attending physician in determining your treatment plan.

If you do not have an advance health-care directive and are interested in making one, we will provide you with the opportunity to speak with individuals who can help you, such as a case manager, nursing supervisor or chaplain. These individuals have examples of advance health-care directives. Examples may also be available through your doctor, your county bar association, your county Area Agency on Aging office or your local chapter of the American Association of Retired Persons. The law requiring hospitals to ask patients about living wills applies to adult patients.
PEOPLE YOU MAY WANT TO INVOLVE WHEN CREATING ADVANCE HEALTH-CARE DIRECTIVES

It is a good idea to talk with your doctor about the risks and benefits of any medical procedure or course of treatment that your physician recommends. Ask about possible side effects and any alternatives to the proposed procedure or course of treatment. You may accept or reject your doctor’s advice, and you may seek a second opinion.

Once you have made your decisions about what instructions to include in your advance health-care directive, it is important to talk with your doctor to make sure your physician is comfortable in following your wishes. Likewise, it is a good idea to make sure the person you have given permission to make decisions on your behalf is willing to follow your wishes.

If you tell your physician or your family members about the health care you want to accept or refuse, but do not put your instructions in writing, your wishes will sometimes be followed by health-care providers, depending on how detailed and recent these instructions are. If you want to be certain your wishes are followed, it is best to put them in writing.

Give a copy of your advance health-care directive to your family doctor, lawyer and family and to those people you have named to make decisions for you if you are unable to make them. You also should bring a copy with you every time when you are being admitted to a hospital, nursing home or other health-care facility. You should review your advance health-care directive periodically to make sure your wishes have not changed. Make sure that when there are changes to your advance directive, all old copies are destroyed.

Although you do not need an attorney to draw up advance health-care directives, lawyers may know best how to advise you regarding some legal rules that apply to power of attorney for health-care decisions.

GRAND VIEW POLICIES RELATED TO ADVANCE HEALTH-CARE DIRECTIVES

Grand View has several policies in place to protect your rights to accept or refuse care. They involve issues related to efforts to support vital bodily functions, such as breathing, the beating of your heart, hydration and nutritional intake. Another policy also specifies the donation of organs or tissues.

The Grand View Ethics Committee is available to help families resolve any conflicts related to your care. Please talk to your nurse if you would like to consult with a member of the Ethics Committee.

If you do not have an advance health-care directive and are interested in creating one, please contact a representative of our Case Management Department by calling: 215-453-4487 (Dial 4487 within the hospital.)

The nursing supervisor and chaplain are also available to assist you. To reach either of them, please contact the operator, who will connect you or page the nursing supervisor or chaplain. 215-453-4000 (Dial 0 within the hospital.)
GLOSSARY  You may encounter some of the terms below as you make choices regarding advance health-care directives.

Advance Health-Care Directive
A term covering a living will, health-care power of attorney, or combination document that incorporates features of both.

Agent (Health-Care Agent)
An individual who, through an advance health-care directive, you have given the authority to make health-care decisions on your behalf. This authority is not restricted to end-of-life decision-making but usually is in effect only when you are incompetent. A health-care agent generally may direct health-care providers to provide, continue, withhold or withdraw all forms of medical care from the patient.

Brain Death
Complete stopping of all function of the brain that cannot be reversed. A brain-dead person is not in a coma, but is, in fact, dead.

Cardiopulmonary Resuscitation (CPR)
A method used to restore stopped breathing and/or heartbeat.

Do Not Resuscitate (DNR)
A doctor’s order that alerts other health-care givers that the patient or family, in consultation with the doctor, does not want the patient to be given CPR.

End-Stage Medical Condition
An incurable and irreversible medical condition in an advanced state caused by injury, disease or physical illness that will, to a reasonable degree of medical certainty, result in death, despite the introduction or continuation of medical treatment.

Feeding Tubes
Tubes inserted through the nose, mouth, stomach, etc., to feed patients who are no longer capable of eating normally.

Incompetent
Not able to understand, make and communicate health-care decisions, even when provided appropriate information and aids. A patient may be competent to make some simple health-care decisions, but incompetent to make other more complex decisions.

Intravenous (IV) Therapy
A treatment method that provides nutrition and water and/or medication through a thin tube placed in a vein.

Life-Sustaining Treatment
A medical intervention given to a patient that prolongs life and delays death.

Living Will
A written statement of the patient’s personal desires regarding life-sustaining treatment and other care.

Permanently Unconscious
A medical condition in which the patient has total and irreversible loss of consciousness and capacity for interaction with the environment, such as an irreversible vegetative state or irreversible coma. A diagnosis that a patient is permanently unconscious must be made in accordance with currently accepted medical standards and to a reasonable degree of medical certainty.

Representative (Health-Care Representative)
An individual who may make health-care decisions for you should you become incompetent and have no controlling living will, health-care agent or guardian. Like a health-care agent, a health-care representative generally may direct health-care providers to provide, continue, withhold or withdraw all forms of medical care—only when you are permanently unconscious or have an end-stage medical condition. Unless you designate otherwise, your health-care representative will be determined in the following order: 1. Spouse and adult child(ren) who is not the child(ren) of the spouse; 2. adult child(ren); 3. parent; 4. adult sibling(s); 5. adult grandchild(ren); and 6. close friend.

Respirators
Machines used to assist or keep a patient breathing.