



Complete the card with the information about your Advanced Directive and place in your wallet.



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Advance Care Planning

Your guide to end of life decisions

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Your guide

to Advance Care Planning



Why is Advance Care Planning Important?

While the decisions that need to be made at the end of your life may not be easy or comfortable to talk about, they remain some of the most important decisions you need to make. Your values and beliefs weigh heavily into what decision you make. Advance Care Planning allows you to communicate your wishes about your end of life care to your family, friends and healthcare providers. Talking to those closest now will help make your transition peaceful and ensure your voice is heard.

Your Values and Beliefs

No one knows you as well as you do. Throughout every step of the Advance Care Planning process, it is important to keep your values and beliefs in mind. Ask yourself:

- What gives your life its meaning?
- How do your decisions impact your time spent with those you love?
- Are you spiritual or religious? If so, how does your faith impact your choices?
- What will be important to you when you are dying – the location of care, physician comfort, the presence of loved ones?

What Decisions Do I Need to Make?

There are a few key decisions you need to make. We encourage you to review your options and think about how your values and beliefs are impacted by each decision.

Choosing a healthcare surrogate or Medical Power of Attorney: Who do you want to make your healthcare decisions?

Some people choose to leave these decisions to a loved one, such as a spouse, sibling or child. If you choose a healthcare surrogate, that person will make decisions for you if you become unable to do so. However, it is important to discuss options with your surrogate so he or she can act confidently with your best interests in mind.

Life support and life-prolonging treatments: What do I want?

Thinking about and discussing your choices for life support and life-prolonging treatment is important, particularly if you have a serious or life-threatening illness. Issues to be considered as part of your Advance Directives include:

- Tube feeding
- Hydration (IV fluids)
- A ventilator to assist with breathing
- Cardiopulmonary resuscitation (CPR) versus do not resuscitate (DNR) status

Your healthcare provider will always discuss your treatment options with you as long as you are able to understand and make decisions. Waiting until critical moments to make these choices, doesn't give you the time to think and discuss these difficult decisions. You may want to think about how conditions and treatments could impact your life. For example, would you be able to:

- Experience and enjoy life as you do now?
- Communicate and connect with your loved ones?
- Get up, walk or go outdoors?

If you have questions related to any of these treatments, please make an appointment with your Primary Care Provider. He or she can help you review all of the options and decide what you want for your future.

Organ and tissue donation: Is it right for me?

According to the Mayo Clinic, "by donating your organs after you die, you can save or improve as many as 50 lives. And many families say that knowing their loved one helped save other lives helped them cope with their loss." However, organ and tissue donation is not the right choice for everyone. It is a personal decision to make with the support of loved ones.

Now That I Know What I Want, What Do I Need to Do Next?

1. Talk to your loved ones

Some choose to involve their loved ones in every step of the decision process. Others choose to make their decisions and then talk to their family and friends. The important part is letting those closest to you know your desires, even though it is a difficult conversation. Try sitting those you love around the kitchen table after supper – it will likely be emotional, but they will take comfort in knowing what you want when the time comes for decisions to become actions.

2. Talk to your Primary Care provider

Your Primary Care provider is here to provide you with comprehensive care through all stages of life. He or she can answer any questions you have about the decisions you need to make and the treatment options involved. Consider making an appointment just to discuss Advance Care Planning. Bring a family member or loved one to the appointment. As someone who will be with you when the time comes, he or she may have questions about your end of life care wishes.

3. Complete an Advance Directive

Take the time to document your decisions by completing an Advance Directive or Living Will. This form helps give your loved ones and healthcare providers your exact wishes. As most states have their own form, visit stedocs.com/shareddecisionmaking to find the form applicable to you. Once you have completed the form, be sure to let your family know where they can find a copy. It is also recommended to keep a current Advance Directive at your Primary Care provider's office in your personal medical record.

Begin developing your Advance Directive by visiting stedocs.com/shareddecisionmaking.

Advance Care Planning: Terms Explained

Tube Feeding and Hydration

If you are unable to obtain nutrition by eating or are unable to swallow, you may decide tube feeding and artificial hydration are right for you. Tube feeding may mean receiving liquid food either directly into your blood stream, known as parenteral nutrition; or directly in your stomach or bowel, known as enteral nutrition.

While artificial hydration can be done through enteral nutrition, it can also be done through intravenous (IV) fluid replacement. This is done by putting a needle under the skin, typically on your arm or neck. The fluid drips from the bag, through the tube and needle and into your vein.

Ventilator

A ventilator is a breathing machine used mainly in hospitals to assist in the inhalation of oxygen and exhalation of carbon dioxide. Ventilators may be used to help you breathe easier or breathe for you if you have lost the ability to breathe on your own.

Cardiopulmonary Resuscitation (CPR) and Do Not Resuscitate (DNR) Status

CPR can help maintain blood circulation and get oxygen into your lungs, preventing death or brain damage, in the event that your heart stops beating and you are no longer breathing. CPR uses chest compressions and rescue breathing. If you decided CPR is not the right choice for you, you would be considered "DNR," meaning CPR would not be performed if your heart stopped and you were not breathing.