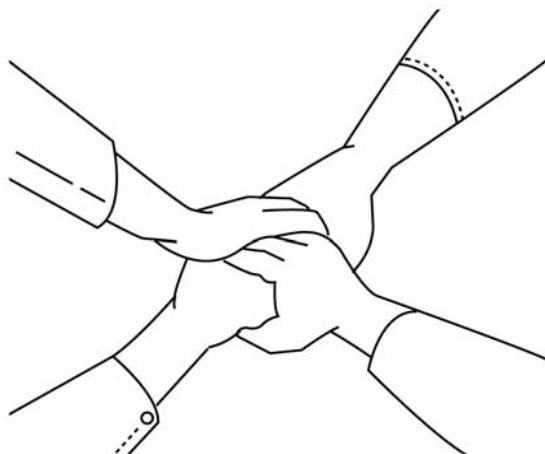




Making your wishes known

Making decisions about your care when facing a serious health condition



Difficult decisions

If you have a serious health condition, it is important to plan the type of care you would want to receive if your condition does not improve or if you have a medical emergency such as your breathing or heart stopping. These are difficult issues to consider. However, when you tell the health care team your wishes, it will guide the type of care you receive.

The information in this booklet can help you:

- make difficult decisions that you or your family may face about your care.
 - understand how your health care team can help.
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Consider what is important to you at this time in your life

Decisions about your care should reflect your personal values and respect your beliefs about what is important. You may want to consider:

- What represents a good quality of life for me?
- Will I still be able to experience the things that make my life meaningful?
- Do I want everything done to prolong my life even if I do not have a good quality of life? Or, would I prefer to allow a natural death?
- Do I have cultural or religious values that influence the decisions made about my care?
- Do I have questions or concerns about the dying process?
- Who should make decisions for me if I can't speak for myself?

What choices do I have?

You have choices for the type of care you would receive if your condition deteriorates or if you have a medical emergency while in the hospital:

1. **Allow Natural Death (AND)** –The focus of care is to keep you comfortable and to enhance your quality of life. Your treatment may include medication to control pain or manage other symptoms such as shortness of breath or anxiety. Depending upon your particular circumstances, choosing to Allow Natural Death (AND) may also include a range of other medical interventions to prolong your life and/or support quality of life, such as antibiotic treatment and hydration. However, cardiopulmonary resuscitation would not be given if you have heart or breathing problems. Rather, you will be provided with comfort care and allowed to die naturally.
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2. **Cardiopulmonary resuscitation (CPR)** – In the event that your breathing or heart stop, the health care team will respond by trying to bring back your normal breathing and heart beat. CPR typically involves “mouth to mouth” breathing and forceful pressure on your chest to try to restart your heart. CPR may also involve electrical shock to your heart (defibrillation) or a plastic tube down your throat into the windpipe to help you breathe (intubation). When you cannot breathe on your own, a machine pumps air in and out of the lungs through the plastic breathing tube (mechanical ventilation). Many patients do not survive CPR because they are too sick to respond to these treatments.

The doctor and health care team will discuss these choices with you. Please see page 6 for a list of terms you may hear.

Do I have to make these decisions alone?

No. You may find it helpful to talk to others about your care wishes. This may include:

- someone from the health care team such as a doctor, nurse, social worker or chaplain
 - your spouse or partner
 - other family members or friends
 - your family doctor
 - someone in your faith group
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Questions to help guide your decision

In addition to considering what is important to you at this time in your life, it is also important to understand your current medical condition and future outlook. You may want to ask your doctor:

- Is it possible to cure my illness or disease?
- Is there treatment to prolong my life?
- What are the ways of improving the quality of my life at this point?
- Are other medical problems or side effects likely to arise?
- Given my condition, what can I expect in the next weeks and months?
- If I choose to Allow Natural Death (AND), what other medical interventions will be provided?

Tell your health care team your wishes for your care

Once you have made your decision, let your health care team know. They will record your wishes on a form called a Physician Ordered Scope of Treatment (or POST). This form provides a summary of your care plan based on your wishes. It is kept in your medical record so that everyone who takes care of you can respect your wishes. You may have a copy of the POST for your records.

Can I change my mind?

Yes, you can change your mind. People sometimes feel uncertain about what is right for them as they become seriously ill or face the end of their lives. Also, your medical condition may change causing you to rethink your decision. If you do change your mind about your wishes, tell your health care team and your new wishes will be documented right away.

Substitute Decision Maker

Sometimes people who are ill become unable to make health care decisions for themselves. If that happens, your Substitute Decision Maker (SDM) may be needed to make decisions about your health care. It is important that your SDM understands your wishes and values. Talk with him or her about your views.

For more information about the role of a Substitute Decision Maker, talk to a member of your health care team, and also ask for a copy of “Making Decisions for Others – Your Role as a Substitute Decision Maker”.

Terms you may hear

Antibiotics

Antibiotics are medications used to treat infections, such as pneumonia, caused by bacteria.

Breathing Machine or Mechanical Ventilator

If a person is unable to breathe, a tube is placed down the throat and connected to a machine that pumps air into and out of the lungs.

Intravenous (IV)

An intravenous is a thin plastic tube, called a catheter that is put into a vein to give you medications or fluid.

Tube-feeding

Tube feeding is a medical treatment to provide nutrition and water when a person is unable to eat or drink enough on his or her own. Liquid food and water are put into a plastic bag and sent through a tube into the stomach or small intestine.

For more information

Ontario's advance care planning guide is available at:

<http://www.culture.gov.on.ca/seniors/english/programs/advancedcare/>

Resources for advance care planning including a workbook for patients from Fraser Health (BC)

<http://www.fraserhealth.ca/Services/HomeandCommunityCare/AdvanceCarePlanning/Pages/FAQ.aspx/>

“Finding Your Way: Medical Decisions When They Count Most.”

http://www.chcd.org/docs/fyw_brochure.pdf

Resources for people facing life-limiting illness, their families, and professional caregivers by palliative care physician Dr. Ira Byock:

<http://www.dyingwell.com/>

Hard Choices for Loving People: www.hardchoices.com

“Food and Fluids When Nearing the End of Life.” Dr. Elizabeth Latimer, Hamilton Health Sciences - patient education.

Available at www.hhsc.ca

“Making decisions for others: Your role as a Substitute Decision Maker.” Hamilton Health Sciences - patient education.

Available at www.hhsc.ca

