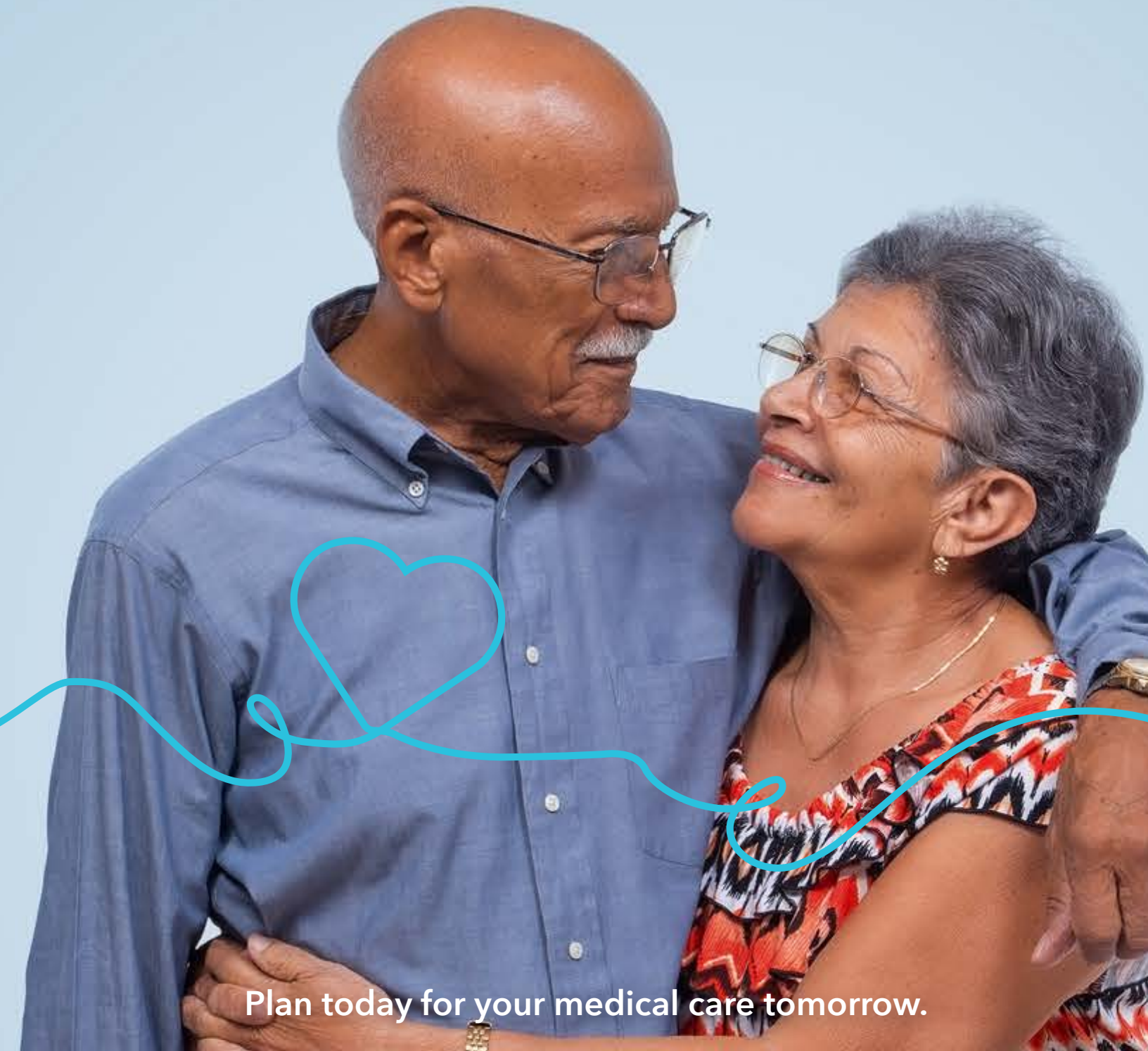




My Life. My Choice.

An Advance Care Directive is for everyone.



Plan today for your medical care tomorrow.

Dear IEHP Member,

Thank you for taking time to learn about advance care directives.

An advance care directive is a legal form that gives you a voice. It lets you say what kind of care you want in the future and name someone you trust to speak for you if you can't speak for yourself.

This packet includes easy-to-read information and answers to common questions. If you need help filling out the form, your primary care doctor can help.

Thank you for taking an active role in your health care.

Your IEHP Team

Your future care starts with advance care planning:

- Think ahead about the kind of medical care you would want if you ever get very sick or can't speak for yourself.
- Talk about your wishes with your doctor and the person you trust to make health care decisions for you.
- These talks can happen at any time — no matter your age or health.

Planning ahead helps your doctor understand what matters to you and offer care that fits your values and goals.

Filling out an advance care directive allows you to:

- Share your wishes about future health care.
- Name an agent (someone you trust) to make health care decisions for you.
- Say what you want about organ donation, autopsy, and funeral or burial plans.

In California, the living will and durable power of attorney for health care forms are combined into one form called an advance care directive.

Why you should have an advance care directive:

- Your values and treatment choices will be respected.
- Avoid needless pain, treatments that may not help or a hospital stay you don't want.
- Lessen your loved ones' burden and worry of deciding for you.
- Ease stress and limit conflict among loved ones.

Common questions about advance care directives (ACD):

Question	Answer
Who can fill out an ACD?	Adults over 18 years old who are of sound mind can fill out an ACD. You do not need a lawyer to fill it out.
Who decides my medical treatment?	Your doctors will inform you about treatment and options. But you will decide on the treatment you want. Doctors cannot decide for you.
What if I am too sick to decide?	If you are too sick to decide, your doctor will ask for your closest available family member or friend to help decide what is best for you. It is best to talk about your wishes ahead of time with your agent, so they know how to decide.
Who can I choose to be my agent?	You can choose any adult you trust. This person will speak on your behalf when you are too sick to do so. You can list this person on the first part of your ACD form.
How do I make the form legal?	To make the form legally valid in California, you must sign it and have it either: • Signed by two witnesses (the form will tell you who can be a witness), OR • Notarized

Continued...

Common questions about advance care directives (ACD):

Question	Answer
Does an ACD expire?	Once completed, an ACD does not expire. The truth is the planning process continues throughout life. It's a good idea to review your ACD to make sure it still reflects your wishes, especially when: • You have aged 10 years. • There's a divorce. • You have a new health diagnosis. • A loved one dies. • You are no longer able to do the things you used to.
What if I change my mind after I complete an ACD?	As we mature, face new health challenges, or have different family experiences, our values, goals and priorities can change. Any changes you make to your ACD need to be shared with your agent and family. Changes can be about treatment options, where to get care, organ donation or a new agent. Give the new form to your agent and doctors, and destroy all the old forms.
Can I use my ACD in a different state?	Each state has its own laws for ACD. If you spend a lot of your time in a state other than California, consider completing an ACD for that state.

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Common questions about advance care directives (ACD):

I'm not sick, so why do I need to have an ACD?

You can never be "too healthy" or "too young" to make an ACD. None of us know when or under what circumstances we may not be able to make our own choices about the care we want and the care we do not want. Younger adults should have at least an ACD that appoints an agent.

Will I still be treated if I do not fill out an ACD?

YES! You will still get full medical treatment. Just know that if you get so sick that you cannot decide your care, someone else will have to decide for you. This person may not know what you want or value.

What else do I have to know about making future health care choices?

According to the 1990 Health Care Decisions Act, a person has a legal right to control their health care choices, including whether to have life support or not. It is never too early to think about these choices and discuss them with your family and doctors.

As a patient, it is up to you to decide and inform your agent, family and doctors if you have completed an advance care directive and give them a copy of it. When you check into a hospital or other health facility, bring a copy of your advance care directive so that it is added to your medical record.

Are there other forms used in advance care planning?

Yes. There are a few forms to consider and it's important to know their differences.

As we've covered, an advance care directive:

- Names a person who can relay your medical wishes to others.
- Tells your loved ones and medical staff what type of future treatment you want or don't want in writing.

However, even with an advance care directive, emergency staff are required by law to do what they can to save a person's life, including CPR and using a breathing machine.

Physician Orders for Life-Sustaining Treatment (POLST)

The POLST:

- Is not an advance care directive.
- Translates patient preferences into medical orders.
- Tells emergency staff what to do. This order must be followed.
- Most appropriate for people with a serious illness or advanced frailty.

The form is titled "Physician Orders for Life-Sustaining Treatment (POLST)". It includes sections for:

- Patient Information:** Name, Date of Birth, Sex, Race, Ethnicity, Address, Phone, Email, and Signature.
- Medical History:** A section for the physician to write the patient's medical history.
- Resuscitation Orders:** A section for the physician to indicate if the patient has no pulse and is not breathing, and if so, whether to attempt resuscitation (CPR) or not.
- Medical Interventions:** A section for the physician to indicate if the patient is frail with a poor ability to breathe, and if so, whether to attempt resuscitation (CPR) or not.
- Artificially Administered Nutrition:** A section for the physician to indicate if the patient is able to eat and drink, and if so, whether to provide artificial nutrition and hydration.
- Signatures and Dates:** A section for the physician, patient, and healthcare provider to sign and date the form.

Differences between POLST and advance care directive forms:

	POLST form	advance care directive
Type of document	Medical order	Legal document
Who completes it?	Doctor	Patient
Who needs one?	Patients who have a serious illness (any age) or advanced frailty near the end of life	All adults
Does it appoint an agent?	No	Yes

Differences between POLST and advance care directive forms:		
	POLST form	advance care directive
What is communicated?	Specific medical orders	General wishes about treatment
Is it easy to find?	Yes, most of the time. Patient has an original, a copy is placed in their medical record and one travels with them.	No. It depends where the person keeps the form, if they told someone about it or gave copies to their agent or doctors.
Can emergency staff follow it?	Yes	No

Source: polst.org

Do Not Resuscitate (DNR)

This form tells emergency staff that you do not want resuscitation if your heart or breathing stops. This includes:

- CPR (chest compressions)
- Your heart restarted with a defibrillator or medicine
- Help with breathing if your heart or breathing stops, like a breathing tube or a machine that helps you breathe.

A DNR form does not stop other types of life support care, such as:

- Artificial nutrition
- Pain relief
- Oxygen for breathing comfort
- Treatment for bleeding or other medical needs

You can include those wishes in your advance care directive.

The DNR form must be signed by you and your doctor. Once it's filled out, it should be posted somewhere easy to see — like near your bed.

If you think a DNR form is right for you, talk to your doctor at your next visit.

IEHP ACD Wallet Card

While it's best to keep a copy of your advance care directive with you, that's not always easy. That's where the IEHP ACD Wallet Card comes in.

This small card lets others know you have an ACD. It can help make sure the right people are contacted in a health emergency to support your care choices.

Fill out the enclosed card and carry it with you at all times.

Want to know more?

If you need help, ask to speak with an IEHP Health Education Department Team Member at **1-800-440 (4347)**.

Online Resources

- Prepareforyourcare.org – See step-by-step videos on how to fill out the Advance Care Directive PREPARE form. Download the free, easy-to-read PREPARE form for your state. Also available in nine other languages.
- **POLST California** - capolst.org – This site provides information to patients and caregivers about POLST. The form is available in twelve other languages.
- **Organ donation information** - donatelifecalifornia.org – Get more information about how organ donation works, what organs you can donate and sign up to be a donor.

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1-800-440-IEHP (4347)
1-800-718-4347 for TTY users

