

Other Things to Consider

Your Durable Power of Attorney for Health Care and/or your State Declaration are important legal documents. Consider keeping the original in a safe, secure place. It is not recommended to place the documents in a safety deposit box as it may prevent your proxy from getting them when needed.

Share your feelings about your wishes for the care and medical treatments you would receive with your family and loved ones in the event you are not able to tell medical people yourself.

You can revoke these documents at any time you choose.

Make 5 copies of each document after you have signed them. Give one to your doctor, dialysis unit, friends, family and clergy. Ask that copies be placed in your medical record.

Additional Resources

For more information, please go to:

Kidney End of Life Coalition

<http://www.kidneyeol.org/>

Other End of Life Resources

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

<http://www.abcd-caring.org/>

<http://www.caregiving.org/>

www.practicalbioethics.org

<http://www.caringinfo.org>

<http://www.agingwithdignity.org/>



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ADVANCE DIRECTIVES



Promoting and facilitating high quality care standards for dialysis and kidney transplant patients in Iowa, Kansas, Missouri and Nebraska.

PATIENT EDUCATION SERIES

Planning Ahead

Advance Directives are a written plan telling other people (your family and healthcare workers) what **you** want to happen, in the event you are unable to tell them yourself. We encourage you to approach your family and dialysis staff regarding your desires in the hope that they understand and advocate for your choices in the event you cannot. Unforeseen events happen in everyone's life. Planning ahead is not losing hope or faith, rather a way of sharing your desires, values and wishes.

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TYPES OF ADVANCE DIRECTIVES

Living Wills

Living Wills can be general or specific. Because they are vague, some difficulty can happen when other people try to interpret them. For example, you may decide that you do not want “life-saving measures if you have an incurable disease, illness or terminal condition” however, kidney disease is an incurable disease and someone could interpret this as you do not want dialysis. Living Wills are called “Declarations” in some states. Some states require a notary sign the document and some states require two witnesses that are not family members or caregivers sign it.

Durable Power of Attorney for Health Care (DPOA)

With this type of Advance Directive, you choose a person to make your healthcare decisions for you if you are unable. The person you have chosen is your “proxy”. You choose this person while you are able to share your values, desires and wishes. This person should be able to follow your desires, understand your choices and act on behalf of your best interests. The drawbacks can be poor communication between the proxy and yourself, which can lead to misunderstandings of your wishes, the proxy being available when needed, and the proxy following your wishes even if they are not in agreement with them. There are

disadvantages to both types of Advance Directives. The advantages of DPOA’s are:

- A fully informed proxy can inform the healthcare team about your specific desires for treatments.
- Increased flexibility when the need for using this directive arrives.

You can withdraw, change or revoke your Advance Directives at any time you choose. If you change your desires, new forms MUST be completed.

For specific information on your state’s laws about Living Wills or Durable Power of Attorney for Healthcare, go to partnershipforcaring.org, or call them at 1-800-989-9455.

Common Life Support Measures

Artificial Nutrition and Hydration

Drinking and eating are replaced by nutrients and fluids given through a tube placed in your stomach, upper intestine or vein. It may be used long-term for people with serious illnesses. Some health care units and doctors may not agree with stopping artificial nutrition or hydration. Discuss this issue with your loved ones so they know your wishes.

CPR - Cardiopulmonary Resuscitation

This is a group of treatments used when your heart stops beating and/or your breathing stops. It may consist of mouth-to-mouth breathing or it can include pressing on your chest to mimic your heart beat and circulate blood. Drugs and electric shocks can also be given to encourage your heart to beat. Discuss with your loved ones when you would want and not want CPR performed.

Mechanical Ventilation

This is a treatment used to support or replace breathing. Some people call this a “vent”. Air is forced into your lungs through a tube that is inserted through your nose or mouth and down your windpipe. It supplies oxygen but cannot improve the condition that caused the lungs to stop working. Make it clear to your loved ones and doctor whether or not you would want this and clarify the circumstances, i.e. if you would again breathe on your own or not.