MIDMICHIGAN HEALTH
ADVANCE MEDICAL DIRECTIVES

Clarify What's Important to You

Think about what's important to you in life. This is the first step toward deciding what medical care you'd want in a life-threatening situation. Once you know what makes you happy to be alive, ask yourself if there are limitations or conditions that would make your life no longer meaningful. Answering the following questions can help you clarify your feelings. But don't forget that your feelings may change with age and with changes in your health, so do this periodically.

Your Quality of Life:

- What do you fear most about being ill or seriously injured?
- How important is it for you to be physically, mentally, or financially independent?
- How would you feel if you could no longer do the activities you most enjoy?
- How would you feel about being moved from your present home? How would you feel about being cared for in a hospital or nursing home at the end of your life?

Your Beliefs:

What role do pain and suffering have in life?
Do you believe medical treatment should prolong life?
When do you believe life stops?

Understanding What You Value:

Check the box that best expresses how important you think it is to be able to do the following:

Importance	Very	Somewhat	Not Very
1. Care for myself without being a burden to others.			
2. Get out of bed every day.			
3. Go out on my own.			
4. Recognize my family and friends.			
5. Talk to and understand others.			
6. Make decisions for myself.			
7. Remain in my home as long as I live.			
8. Live without constant or severe pain.			
9. Live without being dependent on medical treatment or machines to keep me alive.			
10.Be financially independent.			
11.Leave money to my family or a cause I believe in.			
12.Be faithful to my beliefs.			
13.Live as long as possible.			
14.Receive all medical treatment possible.			
15.Die naturally, without lingering.			

Other things that are important to me:

_____

_____

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Treatments You Can Choose or Refuse

Medical treatment at the end of your life generally falls into three main categories—**life supporting**, **life sustaining**, and **life enhancing**. You usually can choose or refuse these treatments at any time. In most cases, you can also try a treatment and then stop it if you don't regain the quality of life you want. In some states, there may be restrictions on refusing or stopping some treatments.

Life Supporting

Life support uses CPR and machines to keep your heart and lungs going when they can no longer work on their own.

Cardiopulmonary resuscitation (CPR) restarts your heart and lungs after your heart stops beating. Then you're usually transferred to a hospital's intensive care unit (ICU), where you may be put on a respirator.

A respirator or ventilator pumps oxygen into your lungs through a tube inserted in your windpipe. In some cases, normal breathing can never be restored.

Life Sustaining

Life-sustaining care involves treatment and machines to prolong your life when your condition can't be reversed or cured.

Tube feeding provides food and fluids through a tube or IV if you can't chew or swallow. Tube feeding can help keep you alive indefinitely; without it your body shuts down.

Kidney dialysis cleans your blood by machine when your kidneys no longer work. Dialysis can prolong your life but can't restore kidney function.

Life Enhancing

Life-enhancing care keeps you comfortable until death occurs naturally. Nothing is done artificially to prolong your life.

Hospice care is comfort care, such as oxygen, food and fluids by mouth, and bathing. Hospice care is given during the last stages of a terminal condition. Death is allowed to occur naturally.

Pain medications, such as morphine and other narcotics, can be given to keep you comfortable.

Do Not Resuscitate

If you don't want CPR, should your heart stop while you're a patient in a hospital or nursing home, talk to your doctor about a DNR (Do Not Resuscitate) order. Also tell anyone who cares for you at home not to call your local emergency services number if your heart stops. In many states, an advance directive doesn't apply if you call 911. It also may not apply if you're admitted to an emergency room.

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Decide Which Treatments You Want

When you consider the medical care you'd want in a life-threatening situation, try to focus on the benefits and risks of each treatment. Think about the quality of life you'd want during or after treatment. Imagine yourself in each of these situations and ask yourself what your treatment wishes would be. Write yes or no in each box.

If I Had…	I Would Want …					
	CPR	Respirator	Tube Feeding	Kidney Dialysis	Pain Medication	No Treatment
AN UNEXPECTED COMPLICATION - and no other severe medical condition.						
- and another severe medical problem, such as heart disease or a stroke.						
A CHRONIC CONDITION - and treatment controlled it.						
- and treatment could no longer control it.						
A TERMINAL ILLNESS - and treatment could still keep me active and comfortable.						
- and treatment could no longer keep me active and comfortable.						
AN IRREVERSIBLE COMA OR PERSISTENT VEGETATIVE STATE - and no other medical condition.						
- and a chronic or terminal illness, such as a kidney failure						

If you had a terminal illness or were in an irreversible coma or persistent vegetative state, another option is hospice care. You would be kept comfortable until death occurred naturally.

Would you want hospice care? _____