ADVANCE DIRECTIVE PLANNING

No one can predict when a serious illness or accident might occur. When it does, you may need someone else to speak or make health care decisions for you. The easiest time to talk about your medical care wishes is before illness or injury, when you have time to think and talk with those you trust. An advance directive is a written statement you prepare that expresses how you want medical decisions made in the future should you not be able to make them yourself.

Advance directives do the following:

- Documents your wishes/preferences
- Eases the decision-making burden on your loved ones
- Allows you to choose someone you trust to make decisions about your care
- Fosters peace of mind and sense of control
- Used in case of sudden accidents/illness; chronic illness; advancing age
- Avoids unwanted medical/surgical treatments

Illinois law allows you to make four types of advance directives: a health care power of attorney; a living will; a mental health treatment preference declaration, and a Do-Not-Resuscitate (DNR)/Practitioner Orders for Life-Sustaining Treatment (POLST).

LIVING WILL

This set of instructions explains the type of life-prolonging medical care you wish to accept or refuse. It can include your wishes about the use of resuscitation (CPR) if your heart stops, a ventilator if you stop breathing, or feeding tubes or IVs if you cannot eat or drink.

POWER OF ATTORNEY FOR HEALTH CARE (POAHC)

This is a legal document that names your substitute decision maker — someone who can make medical decisions for you if you’re unable to do so. An official substitute decision maker can represent your wishes about emergency care but also about other medical issues like potential treatment options, blood transfusions, kidney dialysis, etc. Choose someone you trust, discuss your medical wishes, and make sure the person agrees to represent you in this role.

DECLARATION FOR MENTAL HEALTH TREATMENT

This document allows you to make decisions in advance about three types of mental health treatment:

- Psychotropic medication
- Electroconvulsive therapy
• Short-term admission to a treatment facility

In addition to the documents above, the State of Illinois recognizes the "POLST" form which stands for Practitioner Orders for Life-Sustaining Treatment. This form is a signed medical order that documents the life-sustaining treatment wishes of seriously ill patients.

We encourage you to talk about your wishes with people who are important to you:

• Openly discuss your wishes with your significant other, family, doctor and/or clergy.
• Choose an agent, someone with whom you have discussed your wishes and who is able and willing to represent them.
• Discuss your values, beliefs (health, illness, dying, fears) and wishes with your agent.
• Let your significant other and family know how to easily contact your agent.

THE ADVANCE DIRECTIVE FORMS CAN BE DOWNLOADED AT THE FOLLOWING WEBSITE:


OTHER HELPFUL RESOURCES:

PREPARE FOR YOUR CARE: https://prepareforyourcare.org/en/welcome

This site guides you through what you’ll need to think about as you plan for your future medical care. Your resulting document can serve as an informal statement of your values, preferences and questions and, if you add sufficient detail, a Power of Attorney for Health Care recognized as legal by the state of Illinois.

A PERSONAL DECISION: https://www.isms.org/resources/patients/personal-decision

The Illinois State Medical Society offers resources for advance care planning, including a downloadable booklet describes the importance of advance care planning and provides all of the legal documents listed above.

QUESTIONS?

Do you have questions about advance directives or the planning process? We can help. Contact your health care provider with your questions about the process or any of the resources above.