

# Understanding Health Care Directives and Related Terms

## Why Should You Have a Health Care Directive?

When you are healthy it is easy to avoid thinking about becoming very sick or disabled, or dying. But now is a good time to make some decisions about the kind of health care you would want if your health status changes. A health care directive allows you to communicate your health care decisions to others.

Talking with your family, clergy and doctor or other health care providers now can help you decide what kind of health care you want or do not want. You can let them know what your health care wishes, goals, values and treatment choices are by completing a health care directive form.

You will also appoint someone as a health care agent for yourself. That person will act on your behalf if you are unable to make health care decisions for yourself.

If you create a health care directive, you can include your wishes, goals, values and decisions about such things as:

- medical treatments you want or do not want such as:
  - ventilator or respirator (to breathe)
  - feeding tube (for nutrition)
  - CPR (for restarting your heart and lungs if they stop)
  - dialysis (for kidney failure)

- organ or tissue donation
- nursing home placement
- your funeral.

You may hear a number of terms related to making health care decisions. Some of the common ones are defined here for your information.

## Health Care Directive

A legal document that allows you to state in writing what kind of health care you want to receive if you:

- cannot communicate your medical decisions yourself

or

- prefer not to communicate your medical decisions yourself.

Legislation and terms related to these kinds of documents vary from state to state.

In Minnesota and Wisconsin, the document is called a health care directive. In it you can state in writing your wishes and decisions about health care and appoint someone to make health care decisions for you in the event you are unable or choose not to do so yourself.

For example, if you were in a coma, you could not make your wishes about health care treatments known.

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Before 1998 there were a number of Minnesota health care documents. They included living wills, durable health care powers of attorney, and mental health declarations (also known as advanced psychiatric directives).

To make it easier for people to create directives, the living will and durable health care power of attorney were combined into one health care directive in 1998 by the state legislature. The mental health declaration remains a separate document.

## **POLST (Provider Orders for Life-sustaining Treatment)**

A POLST is for anyone who:

- might die in the next 12 months
- has a serious illness
- cannot make decisions
- does not want CPR.

Your doctor can use the POLST form to document your wishes in a clearly written medical order.

One decision you can make is whether or not you want CPR if your heart or breathing stops. This is known as a “do not resuscitate” order.

## **Do Not Resuscitate (DNR)**

This is a type of care planning decision. It is your request not to receive CPR (cardiopulmonary resuscitation) if your heart stops or if you quit breathing.

If you have this type of request, a DNR order is put into your medical record by your doctor.

Unless you indicate otherwise, health care providers will assume you do want CPR and it will be provided if needed.

## **For More Information**

- Go to [allinahealth.org/hcd](https://allinahealth.org/hcd) for a health care directive and guide for how to fill it out.
- Go to [polst.org](https://polst.org) to learn more about POLST.
- Ask your health care provider if you have questions.