

ADVANCED CARE PLANNING

(Advance Directives)

For patients 18 and older

Advanced Care Planning refers to a process of mapping out the types of medical and non-medical care you would like to receive at some future point should a life-threatening or terminal disease make it impossible for you to express your wishes at that time. This type of planning is an ongoing process. It is a process of thoughtful discussion between you and your care providers, spouse, family, and significant others. While this conversation often results in a document it is more than just a piece of paper. It is an effort to better educate yourself about alternatives regarding the end of life and an opportunity to educate your physician, spouse, family, and others about your values, goals, and wishes related to end-of-life care. This communication between you and your health care provider can be done at any time, preferably when you are younger and still healthy. Once completed, it should be revised on a regular basis – every five years or after any potentially life-changing event, such as marriage, divorce, death of a spouse, or the onset of a life threatening disease.

Advance care planning usually produces an **Advance Directive**, which is a written document that helps to summarize the plans you have made for future care. These documents take several forms, such as a **Living Will** and a **Durable Power of Attorney for Health Care**. While they can be completed without the involvement of your health care provider, it is much preferred to do this together. The future usefulness of these documents is better assured if your healthcare professional has been part of the planning process.

Reference: Nevada for Ethics and Health Policy

Please check one of the statements and sign below.

_____ I have an Advance Directive in effect and agree to provide a copy for my medical record.

_____ I do **NOT** have an Advance Directive in effect currently. I have read and understand the above information on Advance Directives.

Signature: _____ Date: _____