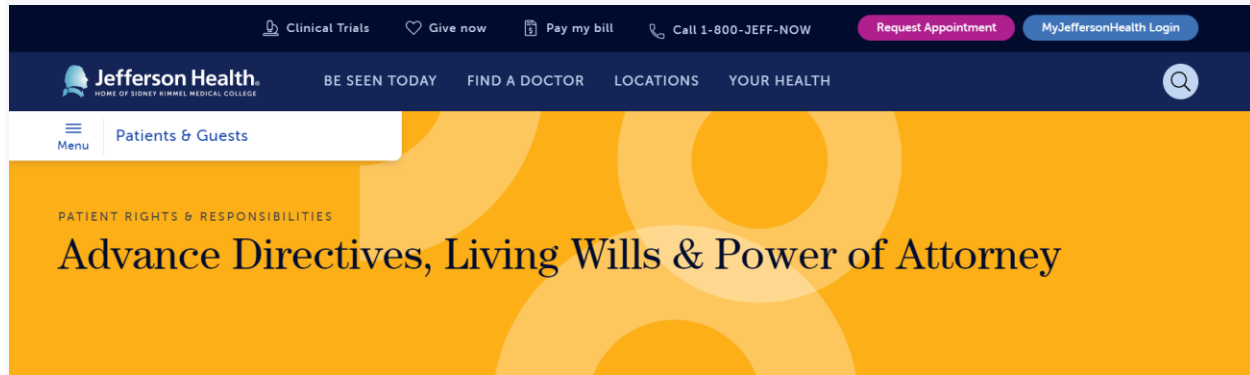


Resource is an excerpt from this website-*please review website for complete information:* <https://www.jeffersonhealth.org/your-health/patients-guests/patient-rights-responsibilities/advance-directive>



**One way to exercise your rights as a patient is to prepare an advance directive. There are two types of advance directives, a Living Will and a Durable Power of Attorney for Health Care.**

In accordance with the Patient Self-Determination Act, you will be asked if you have an advance directive when you are admitted to the Hospital. If you have an advance directive, please share it with your physician and your Hospital staff.

What You Need to Know About Advance Directives, Living Wills and Durable Powers of Attorney for Health Care Thomas Jefferson University Hospitals (which includes Thomas Jefferson University Hospital — Center City, Methodist Hospital and Jefferson Hospital for Neuroscience) provide medical, surgical and psychiatric services, and inpatient and outpatient care.

A full array of homecare services is also available in association with The Home Care Network, which serves as the homecare coordinating agency for the Jefferson Health System member hospitals. A Medicare-certified hospice, hospital-based ambulatory services and physician practices,

support groups, educational programs and physician referral service help meet our community's health needs.

For information on hospital or homecare services at any of these organizations, please call [1-800-JEFF-NOW](tel:1-800-JEFF-NOW). Deaf or hearing-impaired callers can access JEFF NOW by calling [1-800-654-5988](tel:1-800-654-5988) (voice-relay service) or [1-800-654-5984](tel:1-800-654-5984) (TDD).

### **Medical options & the quality of life**

In today's world, you and your physicians have a wider range of treatment options than ever before. Our staff is dedicated to using these treatments to promote your physical and emotional well-being. In cases of serious illness, advanced life-sustaining equipment, medications and surgery are used appropriately for your needs.

The use of advanced life-support treatments is normally of great help, but sometimes it may seem to you and your family that these same treatments are too distressing, or do not aid in recovery, or seem only to prolong the process of dying. In such cases, you may prefer not to avail yourself of life-sustaining treatment. We hope you will gain a better understanding of the choices you can make and the ways you can make them using advance directives. The members of our staff will honor all advance directives to the extent the law in the Commonwealth of Pennsylvania permits.

**Please use the link to review the answers to the following questions:**

<https://www.jeffersonhealth.org/your-health/patients-guests/patient-rights-responsibilities/advance-directive>

Q: What kinds of healthcare decisions will I face?

Q: Who makes my medical decisions?

Q: What happens if I can't communicate directly?

Q: What is a living will?

Q: Who can make a living will?

Q: What if I change my mind after I have written a living will?

Q: Is a living will effective during pregnancy?

Q: Will emergency ambulance staff honor a living will?

Q: What is a durable power of attorney for health care?

Q: What happens if I do not have a living will or durable power of attorney for health care?

Q: If I refuse certain types of life-sustaining therapy, how will that affect my other medical treatments?

Q: May I include direction about organ donation in my living will?

Q: With whom should I discuss my intentions?

Q: If I have more questions about living wills or durable powers of attorney for health care, whom should I contact?

## **Glossary**

Here are some terms that may not be familiar to you, but terms you may wish to know when talking with your family, physician or lawyer:

- **Advance Directive** - A document in which a person either states choices for medical treatment or appoints someone to make choices for him or her – a living will or durable power of attorney for health care.
- **Artificial Nutrition and Hydration** - Methods of delivering food and water when a patient is unable to eat or drink. The patient may be fed through a tube inserted directly into the stomach, or a tube put through the nose or mouth into the stomach. Nutrition and hydration can also be given by a tube placed in a vein.
- **Cardiopulmonary Arrest** - A medical term indicating that a patient's heart and breathing have stopped.
- **Cardiopulmonary Resuscitation (CPR)** - Medical procedures including artificial breathing, chest compression, administration of drugs and electric shock. These procedures are used to try to restore the heartbeat and breathing in the case of cardiopulmonary arrest.
- **Competence (decision-making capacity)** - In a healthcare setting, competence refers to a person's ability to make informed decisions regarding one's medical care. A competent patient can weigh the risks and benefits of suggested treatments; the wisdom of his or her choice is not the issue. When the competence of a patient is not clear, the physician will consult with other physicians to be sure

that a sound judgment is made. If a patient is found to be incompetent, and is judged unable to communicate, then the decision-making processes discussed in this brochure will apply.

- Kidney Dialysis - A medical procedure to remove waste products from the blood when the kidneys are unable to do so.
- Mechanical Ventilator (respirator) - A machine that moves air in and out of the lungs for a patient who is unable to breathe adequately.
- Surrogate - A person appointed by way of a durable power of attorney for health care or a living will to make decisions for someone else. Also called a proxy or attorney-in-fact.
- Terminal Condition - A condition that is incurable or irreversible and in which death will occur within a short time.

[Statutory Form of Declaration \(English - PDF\)](#)