

The Advance Care Planning Process

As an adult with the ability to *make your own medical decisions*, you can accept, refuse, or stop medical treatment. If you lose the ability to make your own medical decisions (for instance, because of an accident or sudden illness), someone else will have to make those decisions for you. You can choose the person you want to take reasonable steps to follow your preferences and instructions for care. This person is called your “Patient Advocate.”

You should thoughtfully identify your personal values, beliefs, wishes, and treatment goals regarding serious illness or end of life care. Your Patient Advocate needs to understand your treatment goals and values, and be willing to act on your behalf, if and when necessary.

In Michigan, two physicians – or your attending physician and a licensed psychologist – have to examine you and declare that you lack medical decision-making ability (also called decision-making capacity) before a Patient Advocate may act on your behalf.

It is also important for you and your Patient Advocate to know that by Michigan law:

- Only one Patient Advocate may speak for you at any given time, in the order you listed in your Advance Directive document.
- Your Patient Advocate(s) must sign the form entitled “Accepting the Role of Patient Advocate” (or a similar form) before they have authority to speak on your behalf.
- Your Patient Advocate may make a decision to refuse or stop life-sustaining treatment only if you have clearly expressed ahead of time in your advance directive that your Advocate is permitted to do so.

NOTE: You may change your mind about your Patient Advocate designation at any time and communicate it in any manner. A written, signed document is recommended, but not required.

PLEASE NOTE: Your Patient Advocate(s)

- May be a spouse or relative, but it is not required. For some people, a friend, partner, clergy member or co-worker might be the right choice.
- Must be at least 18 years of age.
- Should be someone with whom you feel comfortable discussing your preferences, values, wishes and goals for future medical decision-making.
- Needs to be willing to follow those preferences even if that is difficult or stressful, and even if they disagree with your treatment choices. The decisions you would want made may be different from the ones they would make for their own medical care.
- Must be willing to accept the significant responsibility that comes with this role.
- Your Patient Advocate may resign their role at any time and in any manner.

In summary, a good Patient Advocate must be able to serve as your voice and honor your wishes.

Instructing Your Patient Advocate(s)

In order to serve you well, and to be able to follow the medical decisions you would want made, your Patient Advocate needs to know a great deal about you. The discussions between you and the person you choose to be your Patient Advocate will be unique, just as your preferences, values, wishes, goals, medical history and personal experiences are unique.

It is important for you to educate and inform your Patient Advocate(s) about your preferences, values, wishes, and goals. Your advance directive can include general instructions, specific instructions, or a combination of both.

It is also important for your Patient Advocate(s) to know any particular concerns you have about medical treatment, especially any treatment you would refuse or want stopped. It is important to understand that under Michigan law, *your Patient Advocate can only make a decision to refuse or stop life-sustaining treatment if you have clearly given him or her specific permission in your Advance Directive to make that decision (see: Specific Instructions to My Patient Advocate).*

Among the topics you might want to discuss with your Patient Advocate(s) are:

- Experiences you have had in the past with family or loved ones who were ill;
- Spiritual and religious beliefs, especially those that concern illness and dying, and quantity versus quality of life;
- Fears or concerns you have about illness, disability or death;
- What gives your life meaning or sustains you when you face serious challenges.

If your Patient Advocate does not know what you would want in a given circumstance, it is his or her duty to decide, in consultation with your medical team, what is in your best interest.

Your Patient Advocate will have your permission to:

- Make choices for you about your *medical care or services*, such as testing, medications, surgery, and hospitalization. If treatment has been started, he or she can keep it going or have it stopped depending upon your specific instructions;
- Interpret any instructions you have given in your Advance Directive (or in other discussions) according to his or her understanding of your wishes and values;
- Review and release your medical records, mental health records, and personal files as needed for your medical care;
- Arrange for your medical care/treatment in whatever setting is most appropriate in Michigan or any other state, as they think is appropriate or necessary to follow the instructions and directives you have given for your care.

What Now?

Now that you have completed your Advance Directive, you should also take the following steps:

- Share and discuss your Advance Directive with those you named as your Patient Advocate(s), if you haven't already done so. Make sure they feel able to perform this important job for you in the future. Have your Patient Advocate(s) sign the Patient Advocate form ***as soon as possible!***
- Talk to the rest of your family and/or close friends who might be involved if you have a serious illness or injury. Share your values and wishes to help them understand your wishes and give them guidance on your expectations for care. Make sure they know the names of your Patient Advocate(s).
- Talk to your doctor and healthcare providers about your Advance Directive and any specific instructions you have indicated on it. Help them to understand your wishes and give them guidance on your expectations for care.
- Keep a copy of your Advance Directive where it can be easily found (do NOT place it in a safe deposit box or locked safe at home).
- Take a copy of your Advance Directive with you to any doctor appointment, hospital or care setting and ask that it be placed in your medical record.
- Consider registering your Advance Directive with the Michigan Health Information Network (MiHIN) secure electronic storage and retrieval system.

Review your Advance Directive every time you have an annual physical exam or whenever one of the “Five D’s” occur:

Decade – when you start each new decade of your life.

Death – whenever you experience the death of a loved one.

Divorce – if you (or your Patient Advocate) experience a divorce or other major family change.

Diagnosis – if you are diagnosed with a serious health condition.

Decline – if you experience a significant decline or deterioration of an existing health condition, especially when you are unable to live on your own.

Upon your request, a copy will also be sent to any other physician or healthcare facility providing care to you. *Photocopies of an Advance Directive may be treated as originals.*

Burial/Cremation Preference

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My burial or cremation preference is: (initial only one)

☐ Burial

☐ Cremation

☐ Green Burial (Environmentally friendly)

☐ Burial or Cremation, at the discretion of my next-of-kin

☐ I have appointed a Funeral Representative (requires a separate legal document)

Who holds a copy of this Advance Directive?

Healthcare Providers:

Contact Name: _____ Phone: _____

Address: _____

Contact Name: _____ Phone: _____

Address: _____

Hospital System Medical Records Department:

Name: _____

Others (e.g. family members, friends, clergy, attorney):

Contact Name: _____ Phone _____

Address: _____

Contact Name: _____ Phone _____

Address: _____

Contact Name: _____ Phone _____

Address: _____

Contact Name: _____ Phone _____

Address: _____

Contact Name: _____ Phone _____

Address: _____

____ My Advance Directive is electronically stored and is securely accessible to hospitals statewide via
Michigan Health Information Network www.mihin.org/advance-care-planning

____ Other: _____