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## Prepare for the end of life

By: *LYNDA SHRAGER - Albany Times Union*

Most people don't want to think about end-of-life issues. We believe there will always be plenty of time to consider and execute these important decisions.

If you don't have advanced health care directives, the time to think about them is now. After recently losing two friends in a week who were in their early 50s, I realize it is never too early to act.

Why? Because you need to research and understand that making these decisions is an ongoing conversation about values and priorities, and what "quality of life" means to you. Circumstances change and advanced planning for health care is a work in progress.

Advanced health care directives consist of a living will, which specifies what kind of treatment you would want should you become incapacitated, and a health care proxy (health care power of attorney), which names an agent who you have chosen to make medical decisions for you.

Most states recognize both the proxy and the living will, but interpretations may vary and most lawyers agree that having both documents is the most effective. Advanced directives also provide an emotional benefit of letting your loved ones know exactly what your wishes are.

When choosing a health care proxy (agent), consider someone who will be willing and able to convey your wishes without letting his or her own feelings interfere. Choose someone who knows and understands you well, lives close by, will be available long into the future, and is a strong advocate in the face of possible conflict between family, doctors and institutions.

This individual must also meet certain legal criteria designated by your state. It is



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recommended that you also appoint an alternate proxy, should your primary become unavailable or unable to act.

The law requires that you sign and date the health care proxy in the presence of two adult witnesses.

Use the following health organizing tips to help you prepare and maintain advanced directives:

- Keep the original in a safe but accessible location.
- Do not keep it in a safe deposit box or place where others can't find it.
- Give copies to your proxy, alternate proxy, doctors, clergy, family, friends or anyone involved in your health care. Tell your proxy where the original document is located.
- If you enter a hospital or nursing home, have the directives placed in your medical record.
- The American Bar Association Commission on Law and Aging recommends re-evaluating your wishes if any of the "Five D's" occur: reaching a new decade of life, a divorce, a serious critical diagnosis, a decline in your health or the death of a loved one.
- If you wish to make changes, you must complete new documents and redistribute to those involved.
- Advanced directives do not cover avoiding cardiopulmonary resuscitation (CPR) if an ambulance (911) is called. If you do not want CPR you need a "do not resuscitate" (DNR) order that will be respected outside of a hospital. You must have "out of hospital DNR orders" signed by your physician.

For more information on understanding state-specific directives and help in dealing with end of life decisions, contact Caring Connections, sponsored by the National Hospice and Palliative Care Organization, at <http://www.caringinfo.org> or (800) 658-8898.

In legal matters such as these, it is best to contact your attorney for advice.

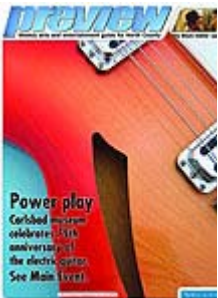
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