

Advance Medical Directive (AMD) Supplement



Name: _____ Date: _____

Signature: _____

This is the AMD supplement to help you examine and think about major and minor medical interventions relative to your quality of life. Complete this document and attach it to your AMD document and your medical power of attorney, if you have one.

It's a more detailed examination of what type of medical interventions you might want, and under what circumstances.

Let's take a quick look at medical interventions categorized into interventions for chronic medical conditions (Chronic Medical Interventions) and interventions for acute medical conditions (Acute Medical Interventions). Chronic medical conditions (Chronic Medical Interventions) include heart disease, diabetes, cancer, etc.) and minor medical conditions (Acute Medical Interventions) include pneumonia, etc. This document can help you decide what interventions you want and under what circumstances.

Quick Definitions

Palliative Care: Palliative care is a medical approach that focuses on relieving pain and life-threatening symptoms and the patient's family. Palliative care professionals work with patients in ways that maximize their quality of life. They have the best experience in knowing how to provide care that helps you have the best quality of life. You could choose palliative care and live with your day-to-day goals without fighting your condition.

Hospice Care: End of life pain and suffering. Hospice care is for people who also choose not to fight their terminal illness. Hospice medical professionals are trained to provide end of life comfort. For example, hospice might believe treating an infection is better than allowing the infection to get worse and treating the pain and suffering. For the better approach, the patient may simply know that at some point in time, they may be 100 dependent on others and have severe dementia.

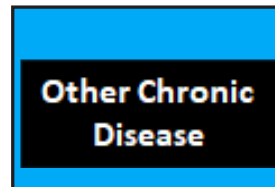
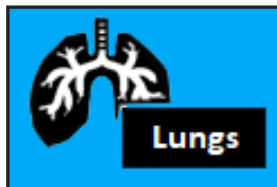
Initial Hospital Care: This document assumes that you are a good responder and hospital-type care to initially stabilize your life (resuscitation, intubation, feeding tube, etc.) unless you've completed a community DNR or POLST document. Once stabilized, interventions after a certain age, ability level, cognitive capability, financial burden or combination that treatment should be stopped, or NOT be provided will be addressed.

Sample Only

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Life Sustaining & Prolonging Medical Interventions

CHRONIC DISEASE MEDICAL INTERVENTIONS



MINOR MEDICAL INTERVENTIONS

Fight with medication

- Infections
- Sepsis
- Etc.

Rush to the Emergency Room

- Dehydration
- Flus & colds
- Pneumonia
- Infections
- Other ailments

Bring to Doctor & Follow Advice

Bring to Doctor, but NEVER hospital

If you want medical professionals and your family to understand your objectives, you need to make this very clear. As we age, this ability often diminishes, especially if we've never thought out the issues. This document helps you think out the issues and put your objectives into words.

If your competent, you can always reexamine your objectives and renounce any documents that may be in existence. Medical professionals are trained to ask you what you want.

Our decisions at seventy and ninety may be very different. CMI questions refer to treating chronic conditions. Almost everyone wants to treat chronic illnesses when they're young, but as we reach advanced old age, some of these treatments are less desirable. Open heart surgery is an easier decision to make at seventy than at ninety. Chemotherapy may be tolerable at fifty-five and a death sentence at ninety-five. That said, I may want to make every day easier to live and am not ready for death. Stopping CMIs and using palliative care is a way to address this objective.

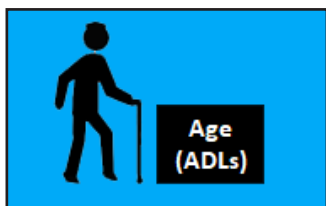
MMI interventions refer to areas that are always dealt with by young folks but may have significant deleterious effects for people of advanced old age. For example, if your ninety-five, completely dependent on others and have severe dementia, do you want to treat sepsis or pneumonia? At this age, both diseases are likely to kill you. If I believe a certain set of conditions are likely to make you ready for death, then eliminating MMIs and opting for hospice care may be the best way to address this objective.

Questions 1 – 4 are designed to get you to think about situations when you may not want CMI or MMI treatments. These areas are (1) age and ability, (2) cognitive capability, (3) passions and hobbies, and (4) finances and burdens.

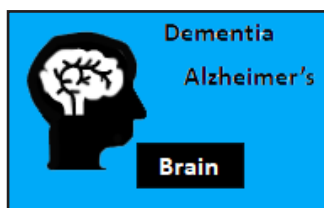
Do The Below Impact Your Thoughts On CDMI & MMI

THIS IS NOT AN ARGUMENT FOR EUTHANASIA.

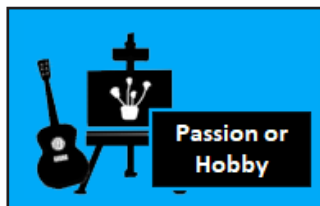
Age + Ability (ADLs) Concerns



Cognitive Concerns



Passions & Hobby



Finances & Burdens



Rather, without extraordinary, and other medical interventions, God's course will run. Some religions are vocal on the notions of "extraordinary" medical interventions. Other's are silent. What all religions agree with is that the individual's will is sacrosanct.

In other words, it is the individual's right, with God, to determine what kinds of medical interventions they want and under what circumstances. Some of us have seen the results of seniors kept alive beyond the senior's ability to enjoy their life. We've seen our loved ones bedridden, fed by tube, and unable to recognize their circumstances and their loved ones. The key point is that God makes you responsible. CarePlanIt helps you take that responsibility seriously.

Let's start with CMI and MMI. Some of us have some pretty clear ideas of what we want, especially when we're very old. If the idea of being in a nursing home terrifies us, we're usually equally terrified of lying paralyzed on our backs, attached to a feeding tube, and using a bedpan. Some patients can live decades in this condition. Especially if CMI and MMI interventions are authorized.

CMIs focus on chronic diseases. At some time in our life, fighting these diseases may simply become too uncomfortable. Heart diseases and cancer are examples of diseases where treatments in advanced old age can be very painful and even result in death. Open heart surgery gets progressively more deadly to aging patients. This is true of any major surgery. Cancer treatments also bring increased risks as we age.

The good news is that if we're healthy, active and don't have other chronic illnesses, these interventions are not that much more risky than those faced by younger patients.

Review all the questions below, then come back and start to answer the questions.

Key Question CMI: Do I want major medical interventions to keep me alive or sustain my life. When I'm relatively young, the answer is almost always, YES! But when I'm of advanced old age, the answer may be different.

For this CMI Section, just tell people what you'd want if you were in good health with no money issues.

You can use Questions 1 -4 below to set limits on your CMIs.

For the tables below, let people know if there are treatments you just don't want under any circumstances. For example, many religious people refuse embryonic stem cell therapies.

Cancer	Kidney	Lungs
<input type="checkbox"/> Anything needed	<input type="checkbox"/> Anything needed	<input type="checkbox"/> Anything needed
<input type="checkbox"/> Nothing	<input type="checkbox"/> Nothing	<input type="checkbox"/> Nothing
<input type="checkbox"/> Decide at the time	<input type="checkbox"/> Decide at the time	<input type="checkbox"/> Decide at the time
If only a select group of treatment are preferred, click what you want from list below.		
<input type="checkbox"/> Chemotherapy	<input type="checkbox"/> Transplant	<input type="checkbox"/> Transplant
<input type="checkbox"/> Bone marrow transplant	<input type="checkbox"/> Dialysis	<input type="checkbox"/> Ventilator
<input type="checkbox"/> Radiation	<input type="checkbox"/> Non-surgery methods	<input type="checkbox"/> Non-surgery methods
<input type="checkbox"/> Ablation	<input type="checkbox"/> Medication	<input type="checkbox"/> Medication
<input type="checkbox"/> Immunotherapy	<input type="checkbox"/> Major surgery	<input type="checkbox"/> Major surgery
<input type="checkbox"/> Gene therapy	<input type="checkbox"/> Minimally invasive	<input type="checkbox"/> Minimally invasive
<input type="checkbox"/> Major surgery	<input type="checkbox"/> Experimental surgery	<input type="checkbox"/> Experimental surgery
<input type="checkbox"/> Any stem cells	<input type="checkbox"/> Any stem cells	<input type="checkbox"/> Any stem cells
<input type="checkbox"/> Only non-embryonic	<input type="checkbox"/> Only non-embryonic	<input type="checkbox"/> Only non-embryonic
<input type="checkbox"/> Experimental surgery		
<input type="checkbox"/> Experimental medication		

Notes:

Heart	Nutrition	Others
<input type="checkbox"/> Anything needed	<input type="checkbox"/> Anything needed	<input type="checkbox"/> Anything needed
<input type="checkbox"/> Nothing	<input type="checkbox"/> Nothing if I don't want food	<input type="checkbox"/> Nothing
<input type="checkbox"/> De		
<input type="checkbox"/> Ath		
<input type="checkbox"/> Pac		
<input type="checkbox"/> De		
<input type="checkbox"/> Ca		
<input type="checkbox"/> Ab		
<input type="checkbox"/> By		
<input type="checkbox"/> Tra		on
<input type="checkbox"/> Val rep		
<input type="checkbox"/> Any		
<input type="checkbox"/> On		
<input type="checkbox"/> PC		
<input type="checkbox"/> Ma		
<input type="checkbox"/> Mir		
<input type="checkbox"/> Exp		
<input type="checkbox"/> Exp		

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Notes: