



# Life Care Planning: Frequently Asked Questions and Answers

## 1) What is an Advance Health Care Directive? (AHCD)

An AHCD is a legal document that allows you to write down your preferences for medical treatment and life support in the case of an emergency. This document tells medical staff what kind of care you want and makes your wishes known. It also allows you to assign an agent, someone to make health decisions on your behalf if you are unable to do so for yourself. It is a legal document and is kept in your medical record. You should keep the original copy in a safe place where you can access it when needed (i.e. when you travel). You can obtain an AHCD form by going to the Healthy Living Center in One North, First Floor in Kaiser Permanente San Jose Medical Center or by going online to [kp.org/lifecareplan](http://kp.org/lifecareplan).

## 2) Does this AHCD take the place of my durable power of attorney?

No, this would provide additional information for the agent to be sure to honor your wishes. The AHCD combines the durable power of attorney - naming a health care agent - and the living will, future health care wishes into one document. You may use it just to name an agent or just to list future

health care wishes or both. You does not need to have a Durable Power of Attorney (DPOA) in addition to AHCD.

## 3) Who should make your healthcare decisions?

Many people select a close family member, but you are free to pick anyone you think could best represent you. Whoever you appoint should have all of the following qualifications:

- Can be trusted.
- Is willing to accept this responsibility.
- Is willing to follow the values and instructions you have discussed.
- Is able to make complex, difficult decisions.

It is helpful—but not required—to appoint one or more alternate persons in case your first choice becomes unable or unwilling to represent you. It is best if only one person has authority at a time, but you can instruct your representatives to discuss decisions together if time permits.

## 4) Can a health care agent start making decisions when the patient is still able to speak for him/herself?

Only if the patient provides permission.

## 5) What happens if my AHCD conflicts with what my agent is saying on my behalf?

The agent is supposed to follow what is written in the AHCD, unless, they have information otherwise and the decisions are in the best interest of the patient. It may be that the document is old and the patient is in a different state of health/illness.

## 6) Can I use the AHCD to make decisions for my adult child with special needs?

Only an adult with capacity can complete an AHCD, so an adult child without capacity can't do the AHCD to name a parent. In some cases the parent might have conservatorship, which is court ordered (i.e., legal guardian rather than medical decision maker). The conservator carries paperwork with them, Kaiser Permanente does not keep copies of the paperwork due to limited time.

## 7) Does AHCD replace the DNR or POLST?

The DNR/POLST orders are physician orders and doesn't serve as outpatient code status.

## 8) Mental capacity and cognitive impairment - how



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## is it diagnosed, at what point does the agent start making decisions, what does it mean for the patient?

Mental capacity and cognitive impairment - are diagnosed by (2) physicians and listed as determination of capacity and should be specific to health. If this happens, the family should keep a copy of the letter indicating the diagnosis. The agent would start making decisions once the patient is deemed incapacitated.

## 9) What are codes?

Codes are medical orders which tell health care providers what types of resuscitation a patient wishes.

**Full Code:** If a patient's heart or breathing stops, he/she wants all available resuscitation treatments, including chest compressions, electric shocks, and a tube in his/her windpipe.

**Partial Code:** The patient wants some types of resuscitation but not others. Examples:

- A patient with severe lung disease who is willing to be on a breathing machine, but only for a few days.
- A patient with heart failure who wishes to receive electric shocks, if his/her heart is still beating but not in rhythm, but not chest compressions.

**DNR (Do Not Resuscitate):** The patient does not want resuscitation if his/her heart or breathing stops. Other medical conditions such as infections and heart attacks are still treated.

**Comfort Care:** The patient wants all treatments which increase comfort and relieve symptoms but not treatments intended solely to prolong life. Medications and other care are given for pain, breathlessness, nausea, anxiety, and other.

## 10) What is resuscitation?

Resuscitation, or cardiopulmonary resuscitation (CPR), is emergency treatment used to try to revive someone when their heart or breathing stops.

Resuscitation includes:

- Pressing hard on your chest (also called chest compressions) to try to pump blood when your heart is not beating.
- Giving electric shocks to try to restore the heartbeat.
- Inserting a tube into your windpipe attached to a bag to pump air into your lungs.
- Putting medicines in your veins to try to restart the heart.
- Unfortunately, resuscitation fails in most chronically ill people, meaning they die anyway. For those who do

regain a spontaneous heartbeat, resuscitation may cause broken ribs and some degree of brain damage. For these reasons, some people choose not to be resuscitated, preferring instead to die naturally.

## 11) What is a Physician Order for Life Sustaining Treatment (POLST)?

A POLST is a legal document that tells emergency responders whether you want to be resuscitated or have a feeding tube (see explanation of resuscitation and feeding tube below). This bright pink document must be signed by your doctor. To be effective, it must be available to emergency personnel (on your refrigerator, nightstand, or in your suitcase when you travel). It allows you to legally communicate your wishes to emergency responders. You can obtain a POLST form by asking your physician or care manager.

For further questions, call the Life Care Planning Department at 408-361-5781 or visit the Healthy Living Center.

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