



Advance Care Medical Planning: What You Need to Know and Why

Advanced Directives

Choosing a Health Care Agent

- Who would you like to speak for you if you can't speak for yourself? Is it your spouse, sibling, best friend, etc.?
- You have the ability to refuse an individual access to the room when discussing your health care.

After Death

- Organ donation – disposition of the body (burial, cremation, medical school donation, etc.)

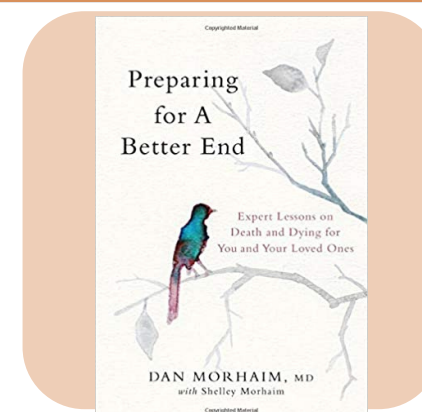


Types of Care

- **Everything**
 - You will get full medical treatment including IVs, surgery, feeding/hygiene tubes, diagnostic tests, etc. regardless of functional state.
 - At times, this is appropriate; at other times it is not.
 - Who decides?
- **Middle Path**
 - This is the choice most of us take.
 - It's my personal choice: I want the best modern medicine has to offer while it is still useful and beneficial.
 - If I'm aware of what's going on and can participate in life, if I'm not in persistent intractable pain, then keep me going.
 - If I'm not, please try reasonable – but not extraordinary – care should a serious life-threatening illness arise.
 - Use hospice and palliative care early.
- **Very Little or Nothing**
 - Letting nature take its course (allowing natural death)
 - This can be a reasonable choice when all hope and expectation of any kind of physical and mental recovery is impossible.
 - Hospice and palliative care is very useful and should be obtained.
- **Allow natural death**

Resources

- **My Directives** www.mydirectives.com
- **AARP** www.aarp.org/caregiving/financial-legal/free-printable-advance-directives/
- **Personal Medical Electronic Health Record**
MiMirx: www.mimirx.org **MyVax:** www.myvax.com



Preparing for a Better End

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Data adapted from the Maryland Behavioral Health Administration's webinar "Advance Care Medical Planning: What You Need to Know and Why", a webinar originally held on 12/2/2021. Presented by Dr. Dan Morhaim.