

Who will speak for you if you cannot speak for yourself?

Health care proxy(ies)

- Your health care proxy is **DIFFERENT** from Power of Attorney; Power of Attorney authorizes someone of your choosing to make **financial** decisions for you.
- Choose the person(s) you trust most to make health care decisions on your behalf based on **your wishes**.
- You can choose one or more proxy(ies). A proxy can be a family member, friend, or anyone you choose who knows about your health and wishes and who is at least 16 years old.
- They must agree to be your health care proxy and sign your **Health Care Directive**.
- If you do not have a health care proxy, you will be appointed a substitute decision-maker following PEI legislation.



Six Steps to Advance Care Planning...

1. **THINK:** What are your values and wishes about your care and treatment? What would you want and not want in an emergency? Do you want to be an organ and tissue donor?
2. **LEARN:** Learn about different medical procedures and what they can and can't do.
3. **DECIDE:** Choose your health care proxy(ies).
4. **TALK:** Communicate your wishes with your health care proxy(ies).
5. **RECORD:** Write down your ideas. Fill out the Health Care Directive form available from the Health PEI website below. Share it with your health care team and keep a copy in a safe place your proxy(ies) can easily access.
6. **UPDATE:** Update your Health Care Directive and/or proxy(ies) as needed

Get started today!

Access healthpei.ca/advancecareplanning to explore resources for creating your advance care plan:

- Guide to Advance Care Planning
- Health Care Directive Form
- Advance Care Planning Workbook
- Advance Care Planning Wallet Card

For further information, contact the Provincial Palliative Care Centre: 902.368.4781



Health PEI

Advance Care Planning

*Communicating your wishes
for future medical care*

Advance Care Planning

What is it?

Advance Care Planning is the process of thinking and communicating about your health, goals, and wishes so that your future health care team knows what you would want if you are unable to communicate. The written documentation of your Advance Care Plan is called a **Health Care Directive**.

It also involves identifying those you want to speak on your behalf if you are unable to do so. The person(s) you choose will be your health care proxy(ies) and will make decisions based on your wishes.

Why is it important?

Your health care team wants to provide you with the best care possible based on what you would want for yourself. You may not be able to express your wishes during a medical situation, so your Health Care Directive and health care proxy(ies) will inform your team of what you would want.

You do not need a health care provider to do Advance Care Planning or to complete a Health Care Directive.

Goals of Care

A goals of care discussion is completed between yourself and your doctor/nurse practitioner to provide a general focus for your care, especially if you are admitted to the hospital.

Some patients wish to have all treatments, including resuscitation (see CPR section), done to preserve their life. This may involve wanting some or all the procedures outlined in the CPR section.

Others wish to have medical treatment, excluding resuscitation. This option offers treatment for potentially reversible conditions in addition to symptom control.

Other patients wish to be made comfortable. The focus of their medical care is on the management of symptoms without life-preserving or life-extending treatments.



Cardiopulmonary Resuscitation (CPR)

If your heart stops beating and/or you stop breathing, CPR may be started, which could involve the following procedures:

- Chest compressions: pushing hard and fast on the chest to try to pump blood to the rest of the body
- Defibrillation: the delivery of electric shock(s) to the chest to try to restart the normal heart rate and rhythm
- Intubation and ventilation: the process of inserting a tube into the airway to try to deliver oxygen and simulate breathing
- Medications for jumpstarting the heart
- Intensive Care Unit (ICU)/Critical Care Unit (CCU) admission to maintain adequate breathing and heart function if CPR is successful

Consider whether you would want these procedures done. Unlike what you may see on TV, CPR has risks and is often unsuccessful. Very few CPR survivors will return to their previous way of life.

You can change your **Health Care Directive** at any time!

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