



Policy Title: ADVANCE DIRECTIVES

Your Rights to Make Health Care Decisions
Advance Directives

You have the right to make health care decisions about the medical care you receive. If you do not want certain treatments, you have the right to tell your physician you do not want them and have your wishes followed.

You also have the right to receive information from your physician to assist you in reaching a decision about what medical care is to be provided to you. Physicians have the responsibility to provide patients with information that can help them to make a decision. Your physician will explain:

- what treatments may help you;
 - how each treatment may effect you, that is, how it can help you and what, if any, serious problems or side effects the treatment is likely to cause;
- what may happen if you decide not to receive treatment

Your physician may also recommend what, if any treatment is medically appropriate, but the final decision is yours to make. All of this information is provided so you can exercise your right to decide your treatment wisely.

There may come a time when you are unable to actively participate in determining your treatment due to serious illness, injury or other disability. Although it is not possible to specify every circumstance it is possible to decide what kind of treatment you want in most situations.

More people are making health care decisions before they become seriously ill, stating their preferences in writing. A written legal document stating your preferences is called an **Advance Directive**. This document allows you to give instructions of “directive” concerning your medical care and/or appoint someone to act on your behalf if you **become ill you are unable to make these decisions or communicate your wishes.**

Advance directives are prepared before any condition or circumstances occurs that causes you to be unable to actively make a decision about your medical care.

In Connecticut, there are two types of advance directives:

- the living will or health care instructions
- the appointment of a health care representative



Policy:

If a patient requests that his/her Directive or Will be placed into his/her file, the Lighthouse Surgery Center policy will be addressed. If the patient insists on the execution of the Directive or Will, the procedure will be cancelled and scheduled at another facility.

The nature of our health care practice is one of expected outcomes regarding non-emergency, elective procedures on those individuals whose medical conditions is stable and who are prepared for this plan of management. DNR (Do not resuscitate) orders are also not accepted.

The patient, responsible adult or Power of Attorney will be informed of the temporary suspension of the Directive and a waiver will be provided for signature. If a transfer occurs the Directive will then be forwarded to the hospital.

The Lighthouse Surgery Center respects and supports personal decision making of individuals. All competent persons have the responsibility to make reasonable efforts to take care of their own health.

Procedure:

If possible, prior to the procedure date patients will receive a copy of "Your Right to Make Health Care Decisions." A summary of Connecticut Law with Advance Directive Forms is also available at the facility and at the link below:

<https://business.ct.gov/-/media/AG/Health-Issues/yourrightstomakehealthcaredecisions2011version-pdf.pdf>



Policy Title: WAIVER OF ADVANCE HEALTH CARE DIRECTIVES

Advance Directives

If you have an Advanced Directive notice, please review the following waiver. If you do not have an Advanced Directive and would like some information on one, you may notify us on your day of procedure and this will be provided to you.

Advance Directive Waiver

I understand that Lighthouse Surgery Center provides outpatient services. Although, I have an assigned Advance Directives, which includes a DNR, I understand that during my stay at Lighthouse Surgery Center, Lighthouse Surgery Center will decline to honor my Advance Directive. I understand that in the case of a life-threatening emergency, the staff will employ any and all life saving measures for me. Therefore, I am waiving my right to have any advance directives status during my stay at Lighthouse Surgery Center. If I am transferred to another facility for any reason, my Advance Directives will be part of my record and communicated to the receiving facility.

Patient's Signature

Date

Witness Signature

Date



LIGHTHOUSE SURGERY CENTER

Advance Directives Policy

An advance directive for health care is a legal document which allows people to indicate their preferences for treatment and designate someone to make decisions on their behalf if they are unable to do so.

Lighthouse Surgery Center has specific policies related to Advance Directives and Do-Not-Resuscitate (DNR) orders that may require discussion with your surgeon and anesthesia provider PRIOR to your surgery. In the event of an emergency situation during your stay at Lighthouse Surgery Center, we will always implement appropriate lifesaving measures and transfer you to St. Francis Hospital.

Do you have any advance directives? Yes No

Patient or **Legally** Authorized **Representative** (SIGNATURE)

Date

Time

Witness (SIGNATURE)

Date

Time