

WHAT IS MY RESPONSIBILITY?

- Bring a current copy of your Advance Directive each time you come to the hospital. A copy of your Advance Directive will be kept in your chart.
- Talk with your physician, family members and close friends about your healthcare preferences.

WHERE CAN I OBTAIN ADVANCE DIRECTIVE FORMS?

- Illinois Department of Public Health website: <http://dph.illinois.gov/topics-services/health-care-regulation/nursing-homes/advance-directives>
- NCH Spiritual Care Services department

QUESTIONS?

- Contact a chaplain at **847-618-2010**
- Any NCH employee can page a chaplain for you.

HEALTHCARE ADVANCE DIRECTIVES

Northwest Community Healthcare
800 W. Central Road
Arlington Heights, IL 60005

847-618-1000
nch.org

HEALTHCARE ADVANCE DIRECTIVES

nch.org

Power of Attorney for Healthcare

Living Will

**Do-Not-Resuscitate (DNR)/
Practitioner Order for Life-Sustaining
Treatment (POLST)**

Mental Health Treatment

Preference Declaration

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NCH is a not-for-profit 501(c)(3) charitable organization, dedicated to meeting the needs of the community.

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WHAT IS AN ADVANCE DIRECTIVE?

Advance Directives are legal documents allowing you to choose someone to make medical decisions should you be unable. Illinois law recognizes four kinds of Advance Directives.

- Living Will
- Power of Attorney for Healthcare
- Do-Not-Resuscitate (DNR) /Practitioner Orders for Life-Sustaining Treatment (POLST) Form
- Mental Health Treatment Preference Declaration

An attorney is not necessary to complete these documents, although you may choose to retain an attorney's assistance. It is advised that any decisions you make through your Advance Directives should be discussed with your physician and family. At Northwest Community Hospital, a chaplain can assist you in completing these documents.

WHAT IS A LIVING WILL?

A Living Will states that you want death-delaying procedures withheld or withdrawn should you have an incurable and irreversible injury, be permanently unconscious, or have a disease or illness judged to be terminal by your physician.

ADVANCE CARE PLANNING OVER TIME

1 Healthy and Independent

First Steps: Complete a POA. Think about wishes if faced with severe trauma and/or neurological injury.

WHAT IS A POWER OF ATTORNEY FOR HEALTHCARE?

A Power of Attorney for Healthcare (POAHC) allows you to appoint another person to make medical decisions for you if you become temporarily or permanently unable to make decisions for yourself.

WHAT IS A DO-NOT-RESUSCITATE (DNR)/PRACTITIONER ORDERS FOR LIFE-SUSTAINING TREATMENT (POLST) FORM?

- A POLST form is a signed medical order for documenting the life-sustaining treatment wishes of seriously ill patients.
- POLST is designed to honor the freedom of persons with advanced illness or frailty to have or to limit treatment across settings of care.
- It is intended for persons of any age for whom death within the next year would not be unexpected.

WHAT IS A MENTAL HEALTH TREATMENT PREFERENCE DECLARATION?

A Mental Health Treatment Preference Declaration allows you to appoint another person to make mental health treatment decisions for you if you become temporarily or permanently unable to make decisions for yourself. Unlike other Advance Directives, it is not revocable while you are receiving treatment. See your mental health professional for further information.

HOW DO I SELECT A PERSON TO ACT ON MY BEHALF?

You should select someone (over the age of 18) with whom you have shared your wishes regarding your healthcare and someone you trust to follow those wishes.

- You may not select your physician or any health care provider.
- It is recommended that you select a second person, should your primary agent be unavailable, unable or unwilling to act on your behalf.

CAN I USE A POWER OF ATTORNEY FOR HEALTHCARE FROM ANOTHER STATE AT NCH?

Yes. Advance Directives from other states and other alternative documents are all accepted in the state of Illinois, as long as they are properly filled out.

CAN I CHANGE OR CANCEL A LIVING WILL OR POWER OF ATTORNEY FOR HEALTHCARE?

Your Advance Directive may be changed or cancelled at any time. You may indicate your preferences verbally or in writing.

2

Advancing Chronic Illnesses and Functional Decline

Next Steps: Consider how goals of care would change if interventions resulted in bad outcomes or severe complications.

3

Multiple Co-Morbidities and Increasing Frailty

Last Steps: End-of-life plans. Establish a specific plan of care using POLST to guide emergency medical orders based on goals.