

Advance Care Planning Introduction – Making Choices®

What if you had a sudden illness or injury and could not speak for yourself? Who would you want to speak for you? What would you want them to know about your health care goals, values and preferences?

Advance Care Planning is an ongoing conversation for any person over the age of 18, regardless of their health. It is talking with healthcare providers and loved ones about the care you would want to receive if you are unable to speak for yourself. This is important because:

- It keeps you in control of your health care.
- It outlines your healthcare wishes. It can lead to the completion of a document that identifies who you want to make medical decisions if you are unable to speak for yourself (Healthcare Agent).
- Helps the medical team know how to best care for you
- May change over the course of your lifetime
- May help avoid conflict between family members and unnecessary guilt that can have long lasting effects

This is a way to talk about what matters most to you. This conversation is the best way to prepare your health care agent and others to act on your behalf.

What is an advance directive?

It is important to write down your goals, values and preferences. There are many ways to do this. We recommend using a document called an advance directive. The type used most often by our patients is a legal document called an Advance Directive that includes the Power of Attorney for Health Care (POAHC-AD). It lets you name a person to make health care decisions for you. He or she will make decisions only if you cannot make them yourself. You may also include specific instructions for care you prefer.

Are you ready to plan?

Many patients find this process easier with help from one of our facilitators. We encourage you to take advantage of this free service by making an appointment. Facilitators are trained to:

- Guide you through a conversation about your goals and values.
- Help you understand the decisions you need to make.
- Help you complete an advance directive form.
- Make sure the final, legal document clearly represents your goals, values, and preferences.
- Help you communicate your thoughts and preferences to health care professionals and those you love.

An Advance Directive that includes the Power of Attorney for Health Care may be changed any time as long as you are capable. You may revoke your POAHC-AD at any time. A copy of your POAHC-AD belongs in your medical record. Keep a copy for yourself. Give copies to your health care agent(s) and anyone close to you who is likely to be present in a medical crisis.

Start planning now

Make an appointment with an ACP facilitator today to start this process.

At no cost to you, this experienced staff member will help you think about your goals, values, and preferences. He or she can guide a conversation with your loved ones about future medical decisions. By going through this process, your health care agent and /or loved ones will be able to act on your behalf with confidence.

If you know who you will choose as your health care agent(s), we encourage you to invite them to come and be part of the conversation. It will also be helpful for you to bring their address and telephone numbers to your appointment.

Because your advance directive will include your power of attorney for health care, you can name your health care agent(s). You can also state your goals and preferences for future medical care. After you sign it in the presence of witnesses, the facilitator will:

- Provide copies you can give to your health care agent(s) and others.

- Enter your advance directive in your medical record.
- Give you the original to keep where those close to you can find it.

If you want to see an advance directive form, there is a link on our website at www.gundersenhealth.org/advance-care

To schedule an appointment or for answers to your questions:

- **Call Advance Care Planning**
(608) 775-6000 or (800) 362-9567, ext. 56000
- **Visit** gundersenhealth.org/advance-care

You can, if you prefer, complete an advance directive by yourself. Add it to your medical record by using any of these methods:

- Fax: (608) 775-3488 Attention: HIM – Advance Directives
- Mail: Gundersen Health Information Management
1900 South Ave., AVS-002
La Crosse, WI 54601
- Email: medicalrecords@gundersenhealth.org

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