

Advance Care Planning

Terms, Myths and Facts



Common Terms

Advance Directive: a generic term for a document or oral statement that gives instructions about your health care and/or appoints someone to make medical treatment decisions on your behalf should you be unable to make them for yourself. Living Wills, Health Care Surrogate and Durable Power of Attorneys are types of advance directives.

Living Will: a witnessed document or oral statement that indicates your instructions regarding life prolonging procedures should you become terminally ill, permanently unconscious or in the end-stage of a fatal illness.

Health Care Surrogate: a person designated to make health care decisions for you should you become unable to make those decisions yourself.

Durable Power of Attorney: a document granting authority to act in your place even if you lack capacity.

Health Care Proxy: a person selected by your health provider to make medical decisions for you if you have not identified a health care surrogate or durable power of attorney.

Myth: *My doctor must follow my wishes in my advance directive.*

FACT: Laws regarding advance directives give health care providers immunity from liability if they follow your wishes. Your health care provider can refuse to carry out your wishes if they personally object to them or feel they are medically inappropriate. The best way to avoid this is to talk with your providers about your goals, values and beliefs and ensure they understand what wishes you would like followed should someone else have to make these decisions for you.

Myth: *My Health Care Surrogate must follow my wishes stated in my advance directive.*

FACT: The wishes stated in your advance directive serve as a guide to both your surrogate and health care providers. Should your surrogate interpret them differently than you intended, or feel they are unable to carry out the wishes as stated, they are able to make different decisions than what is indicated in your directive. The best way to ensure your surrogate follows your wishes is to talk with them about your goals and values and make sure they understand what their role entails.

Myth: *An advance directive means “do not treat.”*

FACT: Your advance directive should indicate both the treatment you *would* want and the treatment you *would not* want.

Myth: *If I name a health care surrogate, I give up the right to make decisions for myself.*

FACT: Naming a surrogate does not take away your ability to make your own decisions. As long as you are capable, you always have the right to make your own decisions or to revoke your directive.

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Myths and Facts, cont.



A program of Community Hospice & Palliative Care
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Myth: *If I haven't designated a health care surrogate, they will just ask my oldest child to make decisions for me.*

FACT: If you haven't designated a health care surrogate, your medical provider will assign a "proxy" to make your health care decisions. In Florida, they must follow a hierarchy to choose the proxy, at times requiring a majority of your family members to agree and make decisions. This often ends up in disagreements and additional stress for your loved ones.

Myth: *An advance directive must be notarized.*

FACT: In the state of Florida, a notary is not required for a living will and health care surrogate to be valid as long as the documents are witnessed by two people. Your health care surrogate(s) cannot serve as a witness to your advance directive and at least one witness must be someone other than your spouse or a blood relative.

Myth: *If my advance directive was completed in another state, it is not valid here in Florida.*

FACT: Florida law allows the use of an advance directive that was executed in any state as long as it complies with the laws of that state or Florida law. Regardless of where your advance directive was executed, doctors still have a legal and moral obligation to respect your treatment choices, as long as your choices are legal in Florida.

Myth: *The best place for my advance directive is my safety deposit box.*

FACT: Actually, the least desirable place for your directive is a safety deposit box. These forms are usually needed in emergencies; therefore, your health care surrogate(s) and health care providers should be given a copy of your advance directives. Also, you should keep a wallet card or information on your smart phone about who your surrogate is and where your documents can be located.

Myth: *If I am at home and my advance directive says I do not want CPR, if my breathing or heart stops, Emergency Medical Services (EMS) must follow my wishes.*

FACT: EMS must attempt to resuscitate you and transport you to a hospital UNLESS you have a Florida Do Not Resuscitate Order (DNRO) signed by you (or your health care surrogate) and your physician.

Myth: *Advance care planning is for the elderly or people in poor health.*

FACT: Advance care planning is actually for all adults, regardless of their age or health status. A sudden accident or illness could cause you to be unable to make health care decisions for yourself...have the conversation today! Make sure your family and health providers know what care you would want if you are faced with a sudden injury or illness.

You have so much to gain by talking about and documenting your wishes today. To schedule your conversation or request an advance care planning document, visit HonoringChoicesFL.com or call **877.227.0050**.

Honoring Choices® Florida is made possible through the generous support of Community Hospice & Palliative Care Foundation. Learn more at CommunityHospice.com.

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