

Living Wills

I am not afraid of death; I just don't want to be there when it happens--Woody Allen. As competent adults, we have the right to make decisions in advance as to whether or not we would like to decline life support when it is clear that death is imminent or a state of coma becomes permanent. Today, life support systems can keep an individual's body alive for years, even if the brain is no longer functioning or the person is in constant pain. A Living Will (which also may be known as a healthcare directive or directive to physicians) is a document that expresses a person's desires and preferences about medical treatment in case he or she becomes unable to communicate these instructions during terminal illness or permanent unconsciousness. The first living wills helped people who wanted a natural death unattended by artificial life support and other advanced medical techniques. As these documents became more popular and widely available under local laws, they came to include other health care concerns such as tube feeding, resuscitation, and organ donation. While living wills are allowed in all states, they sometimes must follow certain formalities to be effective. What Can a Living Will Cover? Many people believe that living wills only direct health care providers to withhold treatment. While many choose to issue that type of instruction, a living will also allows a person to ask for all available treatment options and medical techniques, or to choose some medical options and reject others. Because a living will involves complicated medical issues, consultation with a doctor may help clarify different treatment types and assist the patient in making living will decisions. Some people do not complete living wills because they worry doctors could let them die when there is still a chance for recovery. However, a living will cannot take effect legally unless the patient is medically determined to be in a permanent vegetative state or terminally ill, and therefore unable to communicate medical preferences. Without a living will or durable power of attorney, family members may end up arguing over what treatments should or should not be provided. Doctors will only consult family members on health care decisions; if a person prefers that a friend or unmarried partner participate in his or her health care decisions, a living will and durable power of attorney enable that person to have a say. Choosing an Attorney-In-Fact The person chosen as the attorney-in-fact or proxy for health care decisions should be a trusted individual who is comfortable discussing health care issues. Because this person may need to argue the patient's case with doctors or family members, or even go to court, an assertive and diplomatic individual may be preferred. The representative should be well aware of the choices made in the relevant documents, and should support those instructions.