

## 325, ASC, LLC

### ADVANCE DIRECTIVES/PATIENT SELF-DETERMINATION ACT

#### Policy

325 ASC, LLC supports the right of each patient to develop an advance directive; however, such advance directive (also known as patient's living will, patient proxy for health care, DNR or DNI) **will be suspended and not be honored during the time of the patient's tenure in our office.**

We will not condition the provision of care or discriminate against any patient based on whether or not an advance directive has been executed, and will provide education for our staff, patients, and the community related to advance directives/the patient self-determination act; however, the hallmark of outpatient surgery is that the patient is reasonably expected to survive the procedure and to be able to provide self-care within 24 hours. **For this reason we will resuscitate every patient.**

#### Procedure

Patients in possession of legal devices described above (ADR, DNR, proxy, Living will) will be asked to sign a release signifying their understanding of the policy of this organization relative to such documents.

Further, patients will agree that it is not the responsibility of 325 ASC, LLC to advise each provider of care (emergency responders, emergency room, acute care facility, etc.) of any Advance Directive of any type and that the patient is responsible to keep a copy of his/her Advance Directive as is his/her designated health care proxy.

Staff will query the patient regarding his/her status relative to an advance directive during the pre-surgical assessment. Information will be documented in a prominent and uniform location in the patient's medical record and brought to the attention of the healthcare team.

At any time that the patient requires direct admit to another health care facility, every effort will be made to advise the receiving organization of the patient's status relative to the advance directive/health care proxy.

#### Definitions

1. Capacity to make health care decisions means the ability to understand and appreciate the nature and consequences of health care decisions (including the benefits and risks or alternatives to any proposed health care) and to reach an informed decision.
2. Capacity to appoint a health care proxy means the ability to understand and appreciate that someone else will make health care decisions for the individual and individual is able to select and designate another to make those decisions.

3. Patient self-determination means that each patient under state law has the right to make decisions concerning medical care, including the right to accept or refuse medical or surgical treatment. They have the right to formulate advance directives and an agency may not discriminate against individuals because he/she has an advance directive.
4. Living will is a written directive established while a person with capacity designates their health care wishes. It states the various types of medical treatment and interventions of the person's preference. The living will instructions are legally valid.
5. Health care proxy is a document that enables a competent adult to appoint someone who is trusted to decide about treatment on their behalf when they lack capacity to do so.
6. Health care agent is the person designated by the health care proxy to make decisions to consent or refuse consent to any treatment, service or procedure to diagnose or treat an individual's physical or mental condition.
7. Alternative agent is an additional health care proxy agent. If the designated health care agent is not reasonably available, willing and/or competent to serve, and is not expected to become so in a manner that will permit him or her to make a timely decision given the patient's medical circumstances.

An operator, administrator, or employee of a health care provider facility may not serve as an agent for a patient of the facility unless the patient is related to the person. A physician can be appointed but the physician cannot serve as both the agent and the attending physician of the patient after the agent's decision-making authority begins.

8. Do Not Resuscitate (DNR) means to forgo any measures to restore cardiac function or to support ventilation in the event of cardiac or respiration arrest.
9. Do not Intubate (DNI) means to forgo intubation to facilitate mechanical means of respiration or other artificial assistance.
10. Surrogate is the person selected to make a decision regarding resuscitation on behalf of another person.
11. Life sustaining measures are treatments utilized to prolong life, such as ventilators, CPR, dialysis, antibiotics and artificial nutrition and hydration.
12. Terminal condition is an illness/injury from which there is no recovery and from which reasonably can be expected to cause death within one year.