



Advance Directives

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An [advance directive](#) is a set of instructions that explain the specific health care measures a person wants if he or she should have a terminal illness or injury and become incapable of indicating whether to continue curative and life-sustaining treatment, or to remove life support systems. The person must develop the advance directive while he or she is able to clearly and definitively express him or herself verbally, in writing, or in sign language. It must express the person's own free will regarding their health care, not the will of anyone else. It does not affect routine care for cleanliness and comfort, which must be given whether or not there is an advance directive.

In Oregon, the Health Care Decisions Act ([ORS 127.505 - 127.660](#) and [ORS 127.995](#)) allows an individual to preauthorize health care representatives to allow the natural dying process if he or she is medically confirmed to be in one of the conditions described in his or her health care instructions. This Act does not authorize euthanasia, assisted suicide or any overt action to end the person's life. To print an advanced [directive form](#).

Requirements

Witnesses: Two adults, at least one of them not related to the person by blood or marriage nor entitled to any portion of the person's estate, must witness or acknowledge the person's signing the advance directive. The person's attending physician, attorney-in-fact, and health care or residential staff may not serve as witnesses.

Health Care Instructions: These may either be general, or relate to the four specific conditions outlined below. However, general instructions, such as the person never wishes to be placed on life support, may be too vague and not provide for a situation in which an accident or emergency requires that the person be placed on life support temporarily. Specific instructions regarding the person's wishes in each of the four scenarios listed below are preferred. Some hospitals' social workers or chaplains will provide instructions and forms for advance directives. The patient's physician can determine whether any of these four conditions apply:

1. **Close to death:** Terminal illness in which death is imminent with or without treatment, and where life support will only postpone the moment of death.
2. **Permanently unconscious:** Completely lacking an awareness of self and external environment, with no reasonable possibility of a return to a conscious state.
3. **Advanced progressive illness:** A progressive illness that will be fatal and is unlikely to improve.
4. **Extraordinary suffering:** Illness or condition in which life support will not improve the person's medical condition and would cause the person permanent and severe pain.

Options

Health Care Representative: An advance directive can appoint someone who is at least 18 years of age to make medical decisions for the person when that individual is not able to do so. Among the decisions this health care representative can make is whether to withhold or remove life support, food or hydration. The health care representative and an alternate must sign the document, accepting their appointment. The patient should appoint a health care representative that he or she trusts completely. A patient can voluntarily revoke their appointment of a health care representative at any time. A general Durable Power of Attorney, which is for financial affairs, does not include authority to make health care decisions.

Special instructions and conditions: These can be inserted into the Health Care Plan or included for the health care representative as long as they don't deal with the distribution of property.

Duration and changes: The advance directive can be designated in effect for a limited period of time. If not, it is in effect until the person revokes it in writing, or dies. A person can cross out words or add words to his or her advance directive to make it better express his or her wishes.

1. You can download a blank Advanced Directive form from the State of Oregon website: http://www.oregon.gov/DCBS/SHIBA/docs/advance_directive_form.pdf
2. You can request a blank form from the surgery center
3. U.S. Living Will web site: <http://www.uslivingwillregistry.com/forms.shtm>

