ATTACHMENT REGARDING DEMENTIA

The following are special instructions I request be followed if I should be suffering with dementia.

1. Mild dementia

With mild dementia, people lose the ability to remember recent events in their lives. Routine tasks, like cooking, become difficult. Some tasks, such as driving, can become more dangerous. If you were to be at this stage of dementia what level of medical care would you want for yourself?

Select one of the four main goals of care listed below to express your wishes. Choose the goal of care that describes what you would want at this stage. Select only one goal and initial on the line before it to indicate your choice.

If I had mild dementia, then I would want the goal for my care to be:

_____ **To live for as long as I could.** I would want full efforts to prolong my life, including efforts to restart my heart if it stops beating.

_____ **To receive treatments to prolong my life, but if my heart stops beating or I can't breathe on my own then do not shock my heart to restart it (DNR) and do *not* place me on a breathing machine.** Instead, if either of these happens, allow me to die peacefully. Reason why: if I took such a sudden turn for the worse then my dementia would likely be worse if I survived, and this would not be an acceptable quality of life for me.

_____ **To only receive care in the place where I am living. I would not want to go to the hospital even if I were very ill.** If a treatment, such as antibiotics, might keep me alive longer and could be given in the place where I was living, then I would want such care. But if I continued to get worse, I would not want to go to an emergency room or a hospital. Instead, I would want to be allowed to die peacefully. Reason why: I would not want the possible risks and trauma which can come from being in the hospital.

_____ **To receive comfort-oriented care only, focused on relieving my suffering such as pain, anxiety, or breathlessness.** I would *not* want any care that would keep me alive longer.

2. Moderate dementia

With moderate dementia, people lose the ability to have conversations, and communication becomes very limited. People lose the ability to understand what is going on around them. People require daily full-time assistance with dressing and sometimes toileting. If you were to be at this stage of dementia what level of medical care would you want for yourself?

Select one of the four main goals of care listed below to express your wishes. Choose the goal of care that describes what you would want at this stage. Select only one goal and initial on the line before it to indicate your choice.

If I had moderate dementia, then I would want the goal for my care to be:

_____ **To live for as long as I could.** I would want full efforts to prolong my life, including efforts to restart my heart if it stops beating.

_____ **To receive treatments to prolong my life, but if my heart stops beating or I can't breathe on my own then do not shock my heart to restart it (DNR) and do *not* place me on a breathing machine.** Instead, if either of these happens, allow me to die peacefully. Reason why: if I took such a sudden turn for the worse then my dementia would likely be

worse if I survived, and this would not be an acceptable quality of life for me.

_____ **To only receive care in the place where I am living. I would not want to go to the hospital even if I were very ill.** If a treatment, such as antibiotics, might keep me alive longer and could be given in the place where I was living, then I would want such care. But if I continued to get worse, I would not want to go to an emergency room or a hospital. Instead, I would want to be allowed to die peacefully. Reason why: I would not want the possible risks and trauma which can come from being in the hospital.

_____ **To receive comfort-oriented care only, focused on relieving my suffering such as pain, anxiety, or breathlessness.** I would *not* want any care that would keep me alive longer.

3. Severe dementia

With severe dementia, people are no longer able to recognize loved ones and family members. People may be awake through the night, disruptive and yelling. Many people become angry, agitated and sometimes even violent. People need round the clock help with all daily activities, including bathing and wiping off their genitals, generally needing to wear an adult diaper at all times.

Select one of the four main goals of care listed below to express your wishes. Choose the goal of care that describes what you would want at this stage. Select only one goal and initial on the line before it to indicate your choice.

If I had severe dementia, then I would want the goal for my care to be

_____ **To live for as long as I could.** I would want full efforts to prolong my life, including efforts to restart my heart if it stops beating.

_____ **To receive treatments to prolong my life, but if my heart stops beating or I can't breathe on my own then do not shock my heart to restart it (DNR) and do *not* place me on a breathing machine.** Instead, if either of these happens, allow me to die peacefully. Reason why: if I took such a sudden turn for the worse then my dementia would likely be worse if I survived, and this would not be an acceptable quality of life for me.

_____ **To only receive care in the place where I am living. I would not want to go to the hospital even if I were very ill.** If a treatment, such as antibiotics, might keep me alive longer and could be given in the place where I was living, then I would want such care. But if I continued to get worse, I would not want to go to an emergency room or a hospital. Instead, I would want to be allowed to die peacefully. Reason why: I would not want the possible risks and trauma which can come from being in the hospital.

_____ **To receive comfort-oriented care only, focused on relieving my suffering such as pain, anxiety, or breathlessness.** I would *not* want any care that would keep me alive longer.

4. Instructions for Oral Feeding and Drinking

If I become unable to make decisions about my healthcare and I stop feeding myself due to Alzheimer's Disease or other progressive dementia, I want oral food and fluids to be provided to me only under certain circumstances.

If I accept food and drink (comfort feeding) when they are offered to me, I want them. I request that oral food and fluids be stopped if, because of dementia, any of the following conditions occur:

- I no longer appear to desire to eat or drink;
- I do not willingly open my mouth;

- I turn my head away or try to avoid being fed or given fluids in any other way;
- I spit out food or fluids;
- I begin a pattern of coughing, gagging, or choking on or aspirating food or fluids; or
- As determined by a qualified medical provider, the negative medical consequences or symptoms of continued feeding and drinking outweigh the benefits for me.

I want the instructions in this directive followed even if the person who has the right to make decisions for me and my caregivers judge that my quality of life, in their opinion, is satisfactory and I appear to them to be comfortable. I have given considerable thought to this decision and want my wishes to be followed.

No matter what my condition appears to be, I do not want to be cajoled, harassed or forced to eat or drink. I do not want the reflexive opening of my mouth to be interpreted as giving my consent to being fed or given drink or misinterpreted as a desire for food or drink.

Before I am admitted to a long-term care facility, I want that facility to affirm its willingness to honor these instructions. If the long-term care facility where I already reside will not honor these instructions, I want to be transferred to one that will.

I want my wishes for life-sustaining treatment, including medically assisted artificial nutrition and hydration (for example, tube feeding, nasogastric tube, total parenteral nutrition) to be honored as documented in this Advance Directive for Medical/Surgical Treatment.