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Ocean County Observer (Toms River, New Jersey)

August 9, 2009 Sunday

SECTION: BUSINESS

LENGTH: 1129 words

HEADLINE: 7 things to know about living wills

BODY:

PRESIDENT BARACK Obama's recommendation last week that all Americans get living wills resonated with those who have been urging the same thing for years.

Call it a quibble - they just wish he had used different wording.

Living wills allow people to specify how they want to be cared for if they become so ill or incapacitated that they're unable to make decisions about their health. Such wills have long been advocated in some form by everyone from estate planners, lawyers and medical ethicists to groups such as the American Medical Association and the American Bar Association.

The failure to have such a document in place can result in the need for a wrenching family decision on whether to withdraw life support, or even a high-profile legal battle such as that involving Terri Schiavo.

Obama used his own family as an example, saying he and First Lady Michelle Obama have living wills and so did his grandmother, who died last November. "You don't want somebody else making those decisions for you," he said, commenting during an online forum on health care sponsored by AARP. "I'd encourage everybody to get one."

Living wills, however, technically are limited in scope and are often confused with regular wills, which deal with transferring property at death. For those reasons, some experts hate the term and say Obama should have used more specific or just broader terminology.

"The term is really inaccurate" for what the president meant, said Kim Dayton, director of the Center for Elder Justice and Policy at Williams Mitchell College of Law in St. Paul, Minn. "What he's really talking about is an advance directive for health care."

"Living will" tends to be used synonymously with "advance directive," but legally only applies when someone is diagnosed with a terminal illness.

An advance directive is much more comprehensive and allows you to both give a broad range of health-care instructions and designate someone to make decisions on your behalf when you are incapacitated. In most states, the law allows you to do both in a single document.

As a catchall term for the key elements, however - used incorrectly or not - few would dispute the need for a living will.

Here are seven key things to know about living wills, or advance directives:

1. Why is a living will important?

It can provide direction and reduce ambiguity during a difficult time by spelling out your wishes on the use of feeding tubes, resuscitation and other procedures that might be needed to prolong your life. Ultimately that should comfort your loved ones and reduce the chances they will be divided over whether additional measures should be taken.

"Some people would be fine going on like Terri Schiavo did for 15 years, because they believe in miracles or just because they want to continue to live," Dayton said. "But others would say "If I can't communicate with my grandchildren, I don't want to go on. These documents can direct that you want every reasonable and feasible treatment."

2. Can't they be dealt with when you get sick?

That's what a lot of people seem to think. Only a small minority have living wills despite promotion by various groups. The rest presumably see no pressing reason to have one.

But Schiavo was seemingly healthy and just 26 when she experienced respiratory and cardiac arrest in 1990 that left her severely brain-damaged and in a persistent vegetative state. The St. Petersburg, Fla., woman had no living will. Her husband, Michael, fought his in-laws in court for years to end her life. Schiavo died in 2005.

3. Can i draft one myself?

Yes. Going to a lawyer can be helpful in order to get advice, learn what medical issues could arise or find out what would happen if you don't have one. But it is not necessary in order to set up these legal documents.

"You absolutely can do this on your own," said Bridget Crawford, a professor at Pace Law School in White Plains, N.Y., who also prepares advance directives. "Anyone who tells you otherwise is just trying to jack up their own fees."

4. How do i get one?

Forms can be obtained online as well as from many hospitals.

Caring Connections, a program of the National Hospice and Palliative Care Organization focused on improving end-of-life care, offers free downloads of the advance directive or living will form for each state at its Web site: <http://www.caringinfo.org/stateaddownload>.

Aging With Dignity, a nonprofit group, publishes an advance directive called "Five Wishes" that can be purchased for \$5 at <http://www.fivewishes.org/five-wishes.php>.

The U.S. Living Will Registry, a private organization that promotes the use of advance directives and stores them online to make them available to health care providers, charges \$125 for lifetime service. But it also makes its services available through member providers that offer them discounted or free to their patients. For more information visit <http://www.uslivingwillregistry.com>.

Because it's a legal document, make sure your form adheres to rules for your state.

5. What should it say?

The standard forms available online or through reputable organizations will take care of the content. Fill in the blanks, have it witnessed and notarized and you're done.

Just make sure you also get health care power of attorney, which many advance directives incorporate. Laws vary state by state as to what happens if people don't have one or both of these documents.

If you want a customized living will, consult an attorney.

6. Do doctors honor them?

Not always, especially if there is disagreement within the family.

The American Bar Association's Web site on living wills warns that "you should be aware that just having a written advance directive by itself does not ensure that your wishes will be understood and respected." Studies have shown, the ABA said, that advance directives do little to influence end-of-life decisions without communication with your likely decision-makers before a crisis occurs.

Accordingly, it's a good idea to discuss the issue with your doctor in advance and give him or her a copy of the document.

7. What common mistakes do people make?

Simple as the process can be, oversights are frequent. They include failing to update a living will done years ago; not updating it when you change states; not also getting health care power of attorney; not telling whomever you named to act on your behalf, and not telling a spouse or other obvious choice that you named someone else.

Other pitfalls: getting too specific with preferences under various medical scenarios, which risks leaving some out, and not storing the document safely or where relatives will find it.

The most common error of all is in not getting one when you're young - or at any age.

"They're really important," said Dayton. "I agree with the president that everybody needs one."