



END-OF-LIFE CARE: MAKING PREFERENCES KNOWN

If you have cancer or another serious illness that will limit your life expectancy, it's essential that your doctors and loved ones know your preferences about the care you want to receive. Even if you can no longer benefit from aggressive treatment intended to cure your cancer or extend your life, you're entitled to *aggressive palliative care*. Palliative care focuses on controlling symptoms of your illness and side effects of your treatments. Palliative care can be especially important at end of life.

If you haven't already done so, talk with your doctor about your options. Ask the hard questions: Are you likely to benefit from continuing treatment intended to extend your life, or is it time to transition to palliative care and hospice? If you have a limited life expectancy, you can enroll in hospice when your doctor certifies that you have an estimated six months or less to live (in some cases, 12 months or less to live). Hospice provides palliative care as well as a wide range of support services for you and your loved ones.

If you're at the point where treatment is no longer helping and your doctor hasn't talked with you about hospice, you can bring it up. It's important to know what hospice is and how it can help at end of life. Knowing about hospice before you need it and before you're ready to enroll will allow you to think through *all* of your options and discuss them with your loved ones.

Hospice care can be provided wherever you call home. Home may be your own or a loved one's residence, a nursing home or an assisted living facility. Hospice provides specially trained nurses and others who can help you stay in your own home as long as possible. It also provides a range of other supportive services from a team of care providers, including doctors, home health aides, social workers, chaplains and volunteers. They will help manage your symptoms and work with you so you can maintain as good a quality of life as possible. The doctor who has been treating your cancer or other illness can still be involved in your care.

Hospice doesn't mean that you've given up hope. Rather, it means that you now have a team of care providers focused on your own and your loved ones' unique needs. Hospice services are available on call 24 hours a day, 7 days a week, but around-the-clock care is not usually provided in your home. Residential hospice programs are available in some communities and can provide such care. Check your health plan to find out what type of hospice programs (in-home and/or residential) it covers and what the eligibility requirements are. For more information about hospice, talk to your doctor, ask for a hospice consultation and look at some of the resources listed at the end of this fact sheet.

COMMUNICATING YOUR END-OF-LIFE WISHES— PUT IT IN WRITING

Everyone has personal preferences about how they want to live the final months or weeks of their life. Putting your wishes in writing and talking with your loved ones and your doctors will help ensure that your wishes are known and will be fulfilled.

If you haven't already prepared an advance directive, durable power of attorney for health care and a will, think about doing that now. Everyone—whether they have a life-threatening illness or not—should have these documents in place. An advance directive spells out the kind of medical treatment you would choose if you are incapacitated or terminally ill and unable to speak for yourself. The accepted format of an advance directive depends on the state where



you live. You can obtain the correct form from your clinic or hospital. It's not necessary to have a lawyer involved, although you may do so if you wish. See the links at the end of this fact sheet for resources to help you prepare these documents. The *Advance Care Planning* fact sheet also covers these issues.

A durable power of attorney for health care allows you to designate one or more individuals as your "health care agent" or "proxy." These individuals can speak on your behalf when you're unable to speak for yourself. You may want to consult a lawyer to create a durable power of attorney for health care and a will. A power of attorney on health care and financial issues can be combined into

one document. Finally, check to see if your Employee Assistance Program can provide a referral for a free legal consultation or one at a discounted fee.

Once you complete these forms, be sure your health care agent has copies. You should also discuss your wishes with your doctors and verify that they have a copy of the advance directive in your medical records.

A will can include as much information as you wish to specify how you want your assets distributed after your death. See the *Advance Planning* fact sheet for more information about preparing a will.

FOR MORE INFORMATION

Aging with Dignity: <http://www.agingwithdignity.org>
(search for "advance directive")

AARP: <http://www.aarp.org> (search for "advance directive")

Help Guide: <http://www.helpguide.org> (search for "advance directive")

Caring Connections: <http://www.caringinfo.org>
(click on the "Planning Ahead" link)

Five Wishes: <http://www.agingwithdignity.org>
(click on the Five Wishes links for information, to download or order a copy of the form)

The Conversation Project: <http://theconversationproject.org>

American Cancer Society:

<http://www.cancer.org/treatment/findingandpayingfortreatment/choosingyourtreatmentteam/hospicecare/index>

Hospice Foundation of America: <http://www.hospicefoundation.org/>

National Cancer Institute:

<http://www.cancer.gov/cancertopics/factsheet/Support/hospice>

National Hospice and Palliative Care Organization:

<http://www.nhpco.org/>

HOSPICE RESOURCES