

PEACEFUL ENDINGS TAKE PLANNING



Ken Cearlock, MD
Medical Director
Mercy Palliative Care

There's no time like the present to plan for the future, especially when it comes to healthcare decisions. Just ask Sheila Cronbaugh, who has been at the bedside of several dying relatives, from grandparents to her father and father-in-law.

On Dec. 4, 2014, she lost her brother, Greg, and experienced the peace that comes with having specific advance directives despite the pain of losing him.

"The death of a loved one is such a traumatic time that no one is thinking clearly," says Sheila, who passionately advocated for an Iowa healthcare directive known as Iowa Physician Orders for Scope of Treatment (IPOST). The IPOST law went into effect July 1, 2012. Having discussions and making decisions ahead of time offers the comfort of having a plan and communicating it to those you care about—before you need it.

Mercy's Medical Director of Hospice, Amanda Sommerfeldt, MD, and Palliative Care Medical Director Ken Cearlock, MD, both regularly experience the benefits of advance care planning in the lives of their patients and their families.

Dr. Cearlock says, "Attention to care goals is important as early as possible when a patient and family are confronting complex acute disease or chronic health problems. A candid, compassionate

discussion is essential to recognize and affirm the personality, values and care preferences of the patient at a time the individual has capacity to express wishes, rather than at a time of crisis."

"All too frequently," says Dr. Sommerfeldt, "people experience a sudden event or illness and there isn't time to have a conversation about treatment goals before difficult decisions need to be made. I see many families struggle with making decisions on behalf of loved ones who never talked about their preferences before illness or injury struck."

Formally establishing directives is important before the worst happens (such as an accident, life-threatening diagnosis or sudden decline in health status). Advance directives help facilitate a more peaceful end-of-life experience for the patient and family members since everyone is informed about what will or will not be done in honor of the loved one's wishes. They help smooth conflicting emotions, prevent undesired medical interventions, outline clear expectations and diminish rivalries due to differences of opinion.



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*Ken Cearlock, MD
Medical Director, Mercy Palliative Care*

THIS PHOTO WAS TAKEN TWO WEEKS BEFORE THE DEATH OF SHEILA CRONBAUGH'S BROTHER, GREG MCMANN, WHO HAD DOWN SYNDROME. SHEILA HAD GUARDIANSHIP, IPOST DOCUMENTS FILED AND A DECLARATION RELATING TO USE OF LIFE-SUSTAINING PROCEDURES IN PLACE FOR GREG. HAVING ADVANCE DIRECTIVES FOR HIS HEALTHCARE BROUGHT HER A SENSE OF PEACE AT A DIFFICULT TIME.





Amanda Sommerfeldt, MD
Medical Director
Hospice of Mercy



“LIFE IS A ROLLERCOASTER. YOU KNOW YOU WON’T LIVE FOREVER, SO IT MAKES SENSE TO DO WHATEVER YOU CAN TO MAKE THE ENDING LESS TRAUMATIC.”

Sheila Cronbaugh

“I believe everyone should be offered the opportunity to discuss their treatment goals and end-of-life wishes, because dying is a part of life,” says Sheila. “Choosing these options when you have a clear mind and are not in a traumatic situation allows the person to make end-of-life healthcare choices that are consistent with their values.”

Sheila has IPOST documents filed for her mother, who has dementia (her father passed away nine years ago). She also had guardianship, IPOST documents filed and a declaration relating to use of life-sustaining procedures in place for her brother, Greg, who had Down Syndrome and a history of heart-related emergencies. When Greg passed away, these advance directives were put into place, allowing Sheila to focus on dealing with her grief.

“As a child, you have to respect what a parent wants,” she

says. “In my brother’s case, he always had health issues and we never knew when one of his health emergencies

would be his last. My brother frequently went from feeling OK to sick fast! In that moment, you’re not in a clear state of mind to make decisions. It was a relief not to worry about being asked a lot of questions about his care and rely on the IPOST to ensure all our planning was followed.

“An IPOST is a document that complements the advance directive and is a more specific explanation of choices (than are possible in a living will) and is prepared with the help of a doctor. It really helps to have a great relationship with your doctor, one who really knows you,” she says. An IPOST is not just about what you don’t want, but also about what you do want.

For example, she says, “I used to think I would never want



to live hooked up to a machine. But, if you’re a younger, healthy person who gets in an accident, you may need those tools for a period of time to overcome it and have a good, quality life,” she adds. The IPOST allows for directives to change depending on circumstances.

Advance directives and a Durable Power of Attorney for Healthcare should be added by your physician to your EPIC electronic medical record for immediate reference by providers and family members.

“I have grown up with death as a part of life,” says Sheila.

“Life is a rollercoaster. You know you won’t live forever, so it makes sense to do whatever you can to make the ending less traumatic.”

Upon request, Mercy’s Pastoral Care department is available to help with advance directives. To learn more about hospice and palliative care, you can view our archived webinars at mercy.org/archivedwebinars/. An Advance Directive form may be downloaded at www.mercy.org/advanceddirective. If you would like more information or have questions, please contact our Mercy Pastoral Care office at (319) 398-6106.

TERMS TO KNOW:

ADVANCE DIRECTIVE — a document signed by a competent person giving direction to healthcare providers about treatment choices in certain circumstances. There are two types of advance directives:

DURABLE POWER OF ATTORNEY FOR HEALTHCARE (DPOAHC) — a legal document that appoints a specific person (usually a relative) to act for you and carry out your wishes any time you are unconscious (not able to know what’s going on) or unable to make medical decisions.

IOWA PHYSICIAN ORDERS FOR SCOPE OF TREATMENT (IPOST) — an order set signed by a medical provider that details an individual’s treatment preferences for life-

sustaining interventions (anything from a DNR order to other wishes, such as feeding tubes or intubation). Generally, this is for the elderly or for individuals who are frail or have chronic or serious illnesses.

LIVING WILL (or Declaration) — a legal document that outlines the kind of medical treatment you do or do not want in certain medical situations, but does not name a patient advocate.

DO NOT RESUSCITATE (DNR) — a medical order that informs emergency medical personnel and other healthcare providers about whether someone should be artificially resuscitated in a medical emergency if his/her breathing and heart beat stops.