

Your Five Wishes

"Five Wishes" is a living will that expresses your personal, emotional, spiritual, and medical needs, if you were to get seriously ill. It allows yourself, your health care team, and your loved ones to gain insight on how you wish to be supported and treated in a time of need.

Wish 1

The Person I Want to Make Healthcare Decisions for Me When I Can't Make Them for Myself

Wish 2

My Wish for the Kind of Medical Treatment I Want or Don't Want

Wish 3

My Wish for How Comfortable I Want to Be

Wish 4

My Wish for How I Want People to Treat Me

Wish 5

My Wish for What I Want My Loved Ones to Know

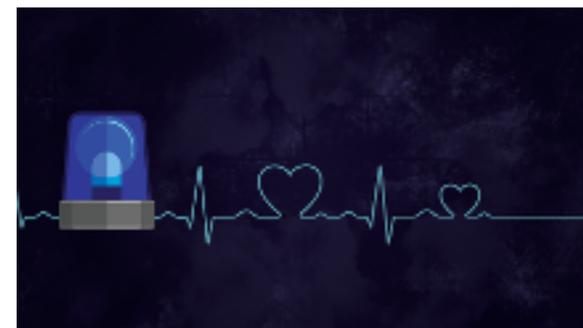
Where to start the conversation

For more information, contact your physician or primary healthcare provider to discuss your code status further. You are entitled to receiving informed education and consent on all available options.

Autonomy in decision-making is encouraged in how you would like to be cared for. Code statuses ensure that patients' voices are heard and that they have the right to die a "good death". Our duty is to honor patient values and wishes.



DECODING A CODE STATUS



What is a Code Status?

- A code status represents the level of medical interventions a patient wants implemented, in the event their heart or breathing stops.
- A Physician's Order for Life-Sustaining Treatment (POLST) form should be discussed between the physician and patient.
- Patients have the right to informed consent regarding end-of-life measures.

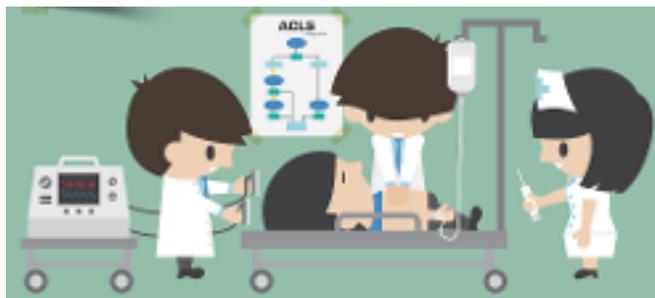
Common Misconceptions

- X** "I only need a code status if declining health or end-of-life is anticipated."
 - ▶ All patients admitted to the hospital must decide and be assigned a code status.
- X** "I'm young and healthy and don't need to worry about potentially coding."
 - ▶ It is vital to be prepared and know what all patients would want done in terms of an emergent health situation.
- X** "Do Not Resuscitate means stop all basic treatment and care."
 - ▶ Patients who choose DNR are to be cared for until their heart or breathing stops.

1

Full Code

- A full code is implemented when someone wants and allows all resuscitation procedures to keep them alive.
- This includes:
 - ▶ Chest compressions
 - ▶ Intubation
 - ▶ Defibrillation



Cardiopulmonary Resuscitation(CPR)

- CPR is a vigorous emergency lifesaving procedure performed when the heart stops beating.
 - ▶ 30 chest compressions
 - ▶ 2 rescue breaths
 - ▶ Repeat as needed
- Immediate CPR can double or triple the chances of survival after a cardiac arrest.
- Patients and their healthcare team should weigh the benefits and risks.
 - Survival vs. Increased damage
 - Independent vs. dependent care
 - Impact on quality of life

2

Comfort Measures Only (CMO)

- Comfort measures only status refers to the medical treatment where a dying person wishes and allows to have a natural death.
- The main goal is to ensure maximum comfort, while addressing and supporting individual psychological and spiritual needs they have.

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Do Not Resuscitate (DNR)

- Do not Resuscitate order warrants that a patient does NOT want CPR if their heart or lungs stop functioning
- Patients still receive quality care and continue with medications, nutrition, and comfort.
- DNRs can be difficult for patients and families to choose and accept.