

LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER -
SHREVEPORT

WITHHOLDING OR WITHDRAWAL OF LIFE-SUSTAINING TREATMENT

Purpose:

To establish policy and procedure concerning the withholding or withdrawal of life-sustaining treatment at LSU Health Sciences Center.

Policy:

1. The competent patient has the right to determine which treatment options he/she will accept or decline, including withholding or withdrawal of life-sustaining treatments.
2. Life-sustaining treatments may be withheld or withdrawn:
 - a. upon verbal oral or written request of a competent patient. Verbal directives require witnesses and written requests require a notary;
 - b. as specified by a valid advance directive when a patient lacks decision-making capability;
 - c. at the request of the Surrogate Decision Maker on behalf of an incompetent patient who has a previous advance directive.

Definitions:

1. Life-sustaining Treatment – Medical care, procedures, or interventions, which when applied to a patient with a terminal illness, would have little or no effect on the underlying disease, injury or condition and which would serve only to delay the timing of death. This may include, but is not limited to, resuscitation, artificial nutrition and hydration, mechanical ventilation, and dialysis.
2. Terminal Illness – A debilitating condition considered to be medically incurable or untreatable in terms of currently available technology, and which can be expected to cause death.
3. Advance Directive – An oral or written statement made by a competent patient, which states his/her preferences regarding medical treatments, including but not limited to, life-sustaining treatments or which designates a surrogate decision maker who will make decision regarding medical care in the event the patient is unable to do so.
4. Surrogate Decision Maker – Refers to a person who is authorized by this policy, consents to withholding or withdrawal of life-sustaining procedures on behalf of a patient who lacks decision-making capacity.

The decision maker is any of the following individuals, in the following order of priority:

- a. The judicially appointed tutor or curator of the patient if one has been appointed; this paragraph shall not be construed to require such appointment in order that a treatment decision can be made under this policy.
 - b. A health care agent designated in writing by the patient through execution of a durable power of attorney for health care or similar document while competent, to make the treatment decision for him/her should he/she be diagnosed as suffering from a terminal condition and lack decision-making capacity.
 - c. The patient's spouse (not legally separated);
 - d. An adult child of the patient or, if the patient has more than one adult child, the adult children who are reasonably available for consultation;
 - e. The parents of the patient;
 - f. The patient's adult sibling(s)
5. Substituted Judgment – Means a decision made by a surrogate decision maker on behalf of a patient who lacks decision-making capacity and who has not executed an advance directive. Substituted judgment decisions shall be made on the basis of indicators of the patient's own desires or, when such indicators are absent or insufficient, on the basis of an assessment of the patient's best interest.

General Information:

1. Advance directives will be honored in most circumstances;
 - a. The document must be produced and must conform to the requirements of state law. If a patient or Surrogate Decision Maker wishes to execute a Living Will, the following forms are available:

SN 1288 – Living Will Declaration (by Adult Patient)
SN 1289 – Living Will Declaration (for Adult Patient)
SN 1290 – Living Will Declaration (for Minor Child)
 - b. To activate the document, the patient must be diagnosed as suffering from a terminal and irreversible condition as determined by two physicians, one of whom must be the treating physician, who have personally examined the patient.
 - c. The patient must also be mentally incapacitated and have little or no likelihood of regaining competency within a reasonable period of time as medically determined.
2. Patients may designate a Surrogate Decision Maker to direct the course of their medical treatment in the event they have lost decision-making capacity.
3. Patients are not required to execute an advance directive as a condition to receiving care.


Responsibilities:

1. Nursing Services will:

- a. ensure a copy of the advance directive is placed in the medical record;
 - b. notify the attending physician if patient has executed an advance directive;
 - c. consult Social Services if the patient wishes to execute an advance directive or change an existing directive or wishes to obtain additional information;
 - d. enter appropriate activities or discussion of advance directives in the medical record.
2. Social Services will:
- a. upon notification from nursing, meet with the patient to provide information regarding advanced directives and/or answer questions.
 - b. if the patient wishes to execute or change an advanced directive, the Social Worker shall assist the patient in completing the directive, and
 - c. notify the patient's nurse that the patient has executed a directive.
3. Attending physician:
- a. assists patients in making decisions about advance directives by providing information necessary to make an informed decision;
 - b. review advance directive with patient upon admission or at significant change in patient's condition, or at patient's request.
 - c. documents reviews of advance directives in the medical record.

Other:

1. Any physician who does not want to participate in withholding or withdrawal of life-sustaining treatment for any reason will not be required to do so. The physician will so indicate this to his/her supervising physician who will assign another physician who can comply with the declaration and assure the responsibility for the terminal care of the patient.
2. See also Hospital Policy 3.2 Staff Rights.



Administrator

9/23/10

Date

Approved by Clinical Board: 2/20/01, 5/18/04, 5/15/07, 9/21/10
Written: 6/95
Revised: 12/97, 4/04, 4/07, 8/10
Reviewed: 1/01, 2/04, 4/07, 8/10