Saint Vincent Hospital

Conversations Across the Lifespan
Advance Care Planning Terms

Allow Natural Death (AND)
AND is a written physician order to allow the natural consequences of a disease or injury while supporting end-of-life comfort care.

Advance Directives (ADs)
Advance directives are a written document completed by the individual defining how they want to be treated if and when they become unable to communicate their wishes. ADs are typically completed when a person is feeling well. ADs can include a living will or Durable Power of Attorney. These papers can be completed by anyone, regardless of their health status, and they must be able to be presented to medical personnel at the time of need.

Do Not Resuscitate (DNR)
A DNR order is a written physician order that means cardiopulmonary resuscitation (CPR) will not be started should the person's heart and/or breathing stop.

Durable Power of Attorney (POA)
This is a signed and notarized form which allows a designated person to make financial decisions including making bank transactions and writing and/or signing checks when an individual is unable to do so due to medical issues. Other names include healthcare proxy or surrogate.

End-of-Life Care
End-of-life care includes the medical management of pain and other end-of-life symptoms. End-of-life care is often provided by Palliative Medicine doctors and/or hospice. Care is focused on comfort and does not shorten or extend the patient's life.

Living Will
A living will can be general or specific in stating what care a person wants or does not want should they be unable to speak for themselves due to an incurable illness or injury. A living will often includes the individual's wishes regarding nutrition, antibiotics, pain relief, hydration, artificial ventilation and the use of blood products.

Medical Durable Power of Attorney (MDPOA)
The MDPOA can also be called the Durable Power of Attorney for Health Care. This signed and notarized form authorizes an identified person or persons to make healthcare decisions for the individual if they are unable to do so for themselves.

Pennsylvania Order for Life Sustaining Treatment (POLST)
This physician order clearly identifies the type of end-of-life care a person does or does not want. This legal form is signed by both the doctor and the ill person once a life-limiting diagnosis has been made. This form can be changed by the individual as their wishes and physical condition changes.