

## COMPARISON OF COMMONLY USED ADVANCE DIRECTIVES IN WASHINGTON

Natural Death Act Health Care Directive	The Five Wishes	End of Life Washington's Advance Directive
<p><b>Pro</b></p> <ul style="list-style-type: none"> <li>Widely available online or from medical providers at no charge.</li> </ul> <p><b>Pro or Con</b></p> <ul style="list-style-type: none"> <li>Simple and concise; only two pages long.</li> </ul> <p><b>Con</b></p> <ul style="list-style-type: none"> <li>Limited to terminal conditions only.</li> <li>No dementia provisions.</li> <li>Not specific enough about what treatments a patient does/doesn't want and when the patient does/doesn't want them.</li> <li>Requires an additional document, a Durable Power of Attorney (DPOA) for healthcare, to name a healthcare agent.</li> <li>Includes a statement that some people find objectionable. ("If I have been diagnosed as pregnant and that diagnosis is known to my physician, this directive shall have no force or effect during the course of my pregnancy.")</li> </ul> <p><b>Notes</b></p> <ul style="list-style-type: none"> <li>Created by Washington's legislature; RCW 70.122.030</li> <li>Most commonly used healthcare directive in Washington; used by hospitals, attorneys, the Washington State Medical Association, Group Health, Caring Connections (a program of the National Hospice and Palliative Care Organization), and many others.</li> <li>Vague, outdated, and not recommended.</li> </ul> <p style="text-align: center;"><b>Not recommended</b></p>	<p><b>Pro</b></p> <ul style="list-style-type: none"> <li>Easy to understand, with embedded directions.</li> <li>Applies to both terminal and nonterminal conditions.</li> <li>Combines the DPOA for healthcare and healthcare directive.</li> <li>Provides details about what treatments a patient does/doesn't want and when.</li> <li>Available in 24 languages.</li> <li>Includes dementia and coma provisions.</li> <li>Provides space to customize decisions.</li> </ul> <p><b>Pro or Con</b></p> <ul style="list-style-type: none"> <li>Includes a significant amount of nonmedical information (being massaged, having your favorite music played, and how you want to be remembered).</li> <li>Eight pages long including instructions.</li> <li>Prohibits any form of aid in dying.</li> <li>Unless statement in Wish 2 is crossed out, indicates that you would want pain medication only to the point of being drowsy or sleeping more than you would otherwise.</li> </ul> <p><b>Con</b></p> <ul style="list-style-type: none"> <li>\$5, and another \$5 for the <i>Next Steps</i>.</li> <li><b>Wish 2 includes a "stealth" antichoice statement that can create a profound internal conflict within the document.</b> (<i>"I do not want anything done or omitted by my doctors or nurses with the intention of taking my life."</i>)</li> <li>Inconsistent; asks you to cross out statements you don't agree with under some Wishes, but not others (Wish 2, in particular).</li> </ul> <p><b>Notes</b></p> <ul style="list-style-type: none"> <li>The Five Wishes conforms to the end-of-life provisions included in the <i>Ethical and Religious Directives for Catholic Health Care Services</i>.</li> <li>End of Life Washington strongly recommends that users cross out the problematic statement in Wish 2 and initial and date it.</li> <li>After elimination of its internal conflict, Five Wishes is a good, all-purpose advance directive.</li> <li>Available from <a href="http://www.agingwithdignity.org">www.agingwithdignity.org</a> or toll-free 888.594.7437.</li> </ul> <p style="text-align: center;"><b>Not recommended unless internal conflict is eliminated</b></p>	<p><b>Pro</b></p> <ul style="list-style-type: none"> <li>Applies to terminal and nonterminal conditions.</li> <li>Includes clearly worded dementia provisions.</li> <li>Combines the DPOA for healthcare and healthcare directive.</li> <li>Uses clear language about what you want/don't want and when you want/don't want it.</li> <li>Free; download from End of Life Washington's website or by request.</li> <li>Available in large-print version.</li> <li>Includes an option for avoiding all life-sustaining or life-prolonging treatment under any circumstances (for the very elderly or people who wish to allow a natural death; e.g., people with Alzheimer's).</li> <li>The coma and persistent vegetative state provisions allow you to set time limits.</li> <li>Affirms your healthcare agents' rights to make a Physician Orders for Life-Sustaining Treatment (POLST) form on your behalf.</li> <li>Allows for an additional statement of values.</li> <li>Uses very specific terminology to prevent subjective interpretation.</li> <li>Instructions include what to do after completing your advance directive.</li> </ul> <p><b>Pro or Con</b></p> <ul style="list-style-type: none"> <li>Comprehensive and detailed; a five-page document accompanied by instructions.</li> <li>Includes a provision for requesting maximum pain and comfort care, even if it might hasten your dying process.</li> <li>Contains no antichoice statements.</li> </ul> <p><b>Notes</b></p> <ul style="list-style-type: none"> <li>The most appropriate document for those who want to express specific wishes and those who have been diagnosed with dementia or Alzheimer's.</li> <li>End of Life Washington's advance directive packet includes additional information about advance planning, including how to talk to your family about dying.</li> <li>Available from <a href="http://www.EndofLifeWA.org">www.EndofLifeWA.org</a> or toll free 877.222.2816.</li> </ul> <p style="text-align: center;"><b>Recommended</b></p>