

“Advanced Directives, the Electronic Medical Record, and Jewish Values”

By Diane F. Roosth

Advance directives were created in response to increasing medical technology over the past forty years and the need for individuals to create a plan for their care. Advanced Directives have become popular in response to media publicizing particular stories. Cases like Karen Ann Quinlan and Terri Shiavo have increased public awareness regarding the development of and availability of Advanced Directives. Public interest has also increased in response to Public Hearings in our State and National Legislatures, including the May 5, 1994, Hearing before the Committee on Finance, United States Senate, 103<sup>rd</sup> Congress, Second Session, “End-of-life” concerns \*. Most recently, the case of Abbie Cohen Dorn, a Jewish woman\*\*, highlights the importance of young adults completing Advanced Directives, in particular, pregnant women prior to giving birth, so that their wishes are documented regarding care and regarding who they want to make their health care decisions should they become temporarily or permanently incapacitated.

As a social worker who has worked in health care for the past 16 years, I have seen many Jewish elderly patients. I watch the generation of World War II and the Holocaust, survivors of the Shoah and survivors of World War II Armed Services, enter the hospital with illnesses and medical conditions. These brethren have lived long lives and now face new challenges that are the consequences of aging and the resulting healthcare needs. As this generation enters their 80’s and 90’s, they and their families are faced with decisions around goals of care never imagined by previous generations. Advanced Directives and other health care related legal documents assist families and patients clarify their wishes about health care choices.

I completed my first Advanced Directive in my forties, and would have thought of it sooner if I knew what I knew today. Our young men and women in the United States and Israeli military complete such documentation before they begin their service. Anyone over the age of 18 has a right to complete an Advanced Directive. If our children in their late teens and early twenties can complete Advanced Directives in the military, I think we adults can consider opening these difficult discussions with our families and our Rabbinic clergy while we are healthy.

Advanced Directives, Health Care Proxies, Power of Attorney for Health Care, and POLST– Physician Orders for Life-Sustaining Treatment, are all terms used to describe a document that is increasingly asked for by Health Care Professionals. Such documents include a legal expression of patient’s care wishes, and identify surrogate decision makers/family spokespersons in the event a patient is unable temporarily or permanently to speak on their own behalf.

Advanced Directives are available in most hospitals for free. They are also available on the computer and can be printed. Some synagogues, Orthodox, Conservative, and Reform, also have copies available. At the end of this article, the reader will find choices of Jewish and secular documents that are available through the internet. A person may get this legal document notarized. The other option is to have two adult witnesses who are not employees of any healthcare facility, one of whom cannot be a family member, sign the document when it is completed. Once completed, the Advanced Directive is a legal document, copies as legally binding as the original. I recommend patients keep their original, give copies to family members and others identified as surrogates, and get copies to their physicians and hospitals to be placed in their patient records.

Legal documents like an Advanced Directive may be scanned into an electronic medical record. This computerized medical documentation of a patient's health care information can be shared between Health Care Providers. Advanced Directives information thus becomes available for medical doctors to easily read and understand as a guideline for patient care. Many medical staff are sensitive to Jewish religious and other faith based concerns that impact health care. An Advanced Directive is a good way to express these values.

There is a new additional form of documentation increasingly used in Health Care Settings in many states in the United States. The POLST – Physician Orders for Life-Sustaining Treatment, is a document a physician discusses directly with patients in the hospital that specifies the types of medical treatment that a seriously ill patient wishes to receive or limit. This document, like the Advanced Directive, when completed, will be placed in a patient's record. This document is a physician's order, and does not require a notary or witnesses like an Advanced Directive. Patients can research the POLST by going on the internet and typing in POLST.

Other medical terms important when considering Health Care Wishes and Advanced Directives include do not intubate (DNI) and do not resuscitate (DNR). A DNI order is a request not to have an artificial breathing machine (ventilator) if you have respiratory failure. A DNR order is a request not to have cardiopulmonary resuscitation (CPR) if your heart stops or you stop breathing. Hospital staff will try and help all patients who stop breathing or whose heart has stopped, unless instructed otherwise by the patient's documentation or medical history. When you tell a physician you want a DNI and/or DNR, an order is entered into the medical record. A DNR order is accepted in all states in the USA.

You might think, "Do I need to complete an Advanced Directive? Can't I just discuss my wishes with my physician who will document my wishes"? While a patient can just discuss their wishes with their physician, I highly recommend completing an Advanced Directive. The process of writing such a document creates opportunities for patients to discuss health care wishes with their Rabbinic clergy and with their families before needing to have health care decisions made for them by someone else.

Health Care Decision Making is a personal decision that can be assisted by more involvement from our Rabbis. I encourage patients and families of all faiths, for whom faith influences their life choices, to discuss their health care wishes with their clergy as part of their process of decision making and of completing their Advanced Directives if they choose to complete one.

When someone has an acute or chronic illness, patients and their families have choices regarding care. Palliative care defines care of a person who is ill with a condition that a physician refers for pain management and/or suspects the patient may die in a year or less. Hospice care defines care of a person who has a medical condition where a physician suspects the patient may die in 6 months or less. Hospice care is, at this time, covered by Medicare and most Health Insurance Carriers.

Part of Health Care Decision making involves planning. Many Jewish elderly patients, and some young Jewish patients, have made pre need burial arrangements both here in the USA and in Israel as a reflection of their Jewish values and Jewish traditions. Pre need arrangements refer to mortuary and cemetery arrangements made while a person is living. People make these arrangements at different ages and stages in their lives so they have control over these decisions and do not leave them to their family members.

My patients and their families yearn for their Rabbis to make a priority of teaching a Jewish Values response to modern medical technology and health care choices. Patients and their families want to know how and when to ask for Rabbinic consultation and visitation in the process of decision making.

If my Aunt Anna lived in 2010, she would know to ask me in Yiddish or English, if I knew how to find someone who could give her directions in today's Healthcare marketplace. She might ask me "Zug Zuh, did you bring the machine"? I would be happy to respond, "Yes, I brought the computer", and to inform her of new paths to find knowledge about and access to Jewish Resources on Health Care, including Advanced Directives and POLST, to better understand 21<sup>st</sup> Century challenges and choices.

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\* "End of Life Issues and Implementation of Advance Directives Under Health Care Reform." Hearing before the Committee on Finance, United States Senate, One Hundred Third Congress, Second Session, May 5, 1994. Transcript published by the U.S. Government Printing Office, Washington, D.C., 1994. Reference courtesy of Melvin Konner, M.D., Ph.D., Samuel Candler Dobbs Professor of Anthropology, and associate professor of psychiatry and neurology, Emory University, Atlanta, GA

\*\*Los Angeles Times, April 10, 2010, "Severely disabled, Is she still a mom? Battle nears over visitation rights of a woman injured in childbirth."

Resources

## I. Websites for Advanced Directives that can be printed for free

Bet Tzedek Legal Services, Publications, California Power of Attorney for Health Care  
<http://www.betzedeck.org/>

Jewish Medical Advanced Directives, The Committee of Law and Standards,  
The Rabbinic Assembly  
<http://www.rabbinicalassembly.org/docs/medical%20directives.pdf>

The Halachic Living Will, California, Agudath Israel  
<http://www.csmc.edu/pdf/CaliforniaHalachicLivingWill.pdf>

The Union of Reform Judaism Advanced Directive, the Kalsman Institute's website at  
the following link, toward the bottom of the page just under "Articles/Documents:"  
<http://www.huc.edu/kalsman/IllnessWellness/resources/>.

Five Wishes – Advanced Directive

*Five Wishes* is available in 23 languages and in Braille to address the needs of an ethnically and culturally diverse nation. Like the English version, translated versions of *Five Wishes* are written in easy-to-understand language. Each foreign language copy of *Five Wishes* carries a side-by-side English translation for medical providers and others who speak only English. (IT HAS NOT YET BEEN TRANSLATED INTO HEBREW).  
[www.agingwithdignity.org](http://www.agingwithdignity.org)

California Advanced Health Care Directive for use in Nursing Homes. Large print.  
[http://www.sfhp.org/files/PDF/providers/forms/Advance\\_Healthcare\\_Directive-English\\_\(2\).pdf](http://www.sfhp.org/files/PDF/providers/forms/Advance_Healthcare_Directive-English_(2).pdf)

## II. Websites for Further Education On Jewish Resources

Jewish Funerals, Burial, and Mourning, published by the K'vod Nachum and the Jewish Funeral Practices Committee of Great Washington  
<http://www.jewish-funerals.org/>

Kavod V'Nichum, Comfort and Mourning  
<http://www.jewish-funerals.org/morekavod.htm>

USCJ (United Synagogue Conservative Judaism) Guide to Chevra Kadisha  
[http://www.uscj.org/Guide\\_to\\_the\\_Hevrah\\_6210.html](http://www.uscj.org/Guide_to_the_Hevrah_6210.html)

Halachic Organ Donor Society  
*HOD Society*, 49 West 45th Street, 10th Floor, New York, NY 10036  
E-mail:[admin@hods.org](mailto:admin@hods.org) Phone: 212-213-5087 Fax: 212-213-9451 Emergency Number:  
1-877-700-HODS or 1-646-645-4637

*GOAL:* Our goal is to educate as many Jews as possible about the *halachic* and medical issues surrounding organ donation, so decisions about donation will be based on facts and not superstition.

[www.HOD.org](http://www.HOD.org)

### III. Websites from Secular Resources

United States Government Funeral Trade Commission, Information on Consumer Rights  
<http://www.ftc.gov/funerals/>

United States Government Federal Trade Commission, Funerals, A Consumer Guide  
Includes The Funeral Rule, Regarding Consumer Rights

<http://www.ftc.gov/bcp/online/pubs/services/funeral.shtm>

Websites (continued)

The Go Wish Game – developed to assist in defining values and priorities regarding health care wishes.

You can play online for free!

[www.gowish.org](http://www.gowish.org)

Thinking Ahead – My Life at the End

<http://caring.community.org/files/ValuesChecklist.pdf>

### IV. Printed Materials

Address, Rabbi Richard F., Editor, A Time to Prepare, Revised Edition, URJ (Union of Reform Judaism) Dept. of Jewish Family Concerns, revised 2002

Dorff, Rabbi Elliott N., Matters of Life and Death: A Jewish Approach to Modern Medical Ethics, Jewish Publication Society, Philadelphia and Jerusalem, 1998.

Dorff, Rabbi Elliott N., The Way Into Tikkun Olam (Repairing the World), Jewish Lights Publishing, Vermont, 2005.

Goodman, Rabbi Arnold, A Plain Pine Box: A Return to Simple Jewish Funerals And Eternal Traditions, Augmented Edition, Ktav Publishing House Inc. in Association with Kavod V'nichum, 2003.

Gordon, Dr. Harvey L., Questions and Answers About Jewish Tradition and The Issues of Assisted Death, URJ (Union of Reform Judaism) Dept of Jewish Family Concerns, revised 2005.

Lamm, Rabbi Maurice, The Jewish Way in Death and Mourning, Jonathan David Company, Inc., 2000.

"Faith in the Face of Bereavement and Loss: Coping with the Question of Evil in the World" Dr. Gili Zivan, PhD, Jewish Philosophy, Bar Ilan University, Assistant Director of Yaacov Herzog Center for Jewish Studies. Published in Hebrew. English translation available with permission of the author.

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