

Primary Care West, P.C.
Subject: Advance Directive Policy
Effective Date: January 3, 2018

Purpose:

The purpose of this policy is to define how Primary Care West, P.C practitioners will provide all patients with the opportunity to express their preferences as to the health care measure they would want – or wouldn't want – if they have a terminal or incapacitating illness through the use of an Advance Directive.

Procedures:

Documentation of whether the patient has executed an Advance Directive (a written instruction such as a Living Will or Durable Power of Attorney for health care relating to the provision of health care when the individual is incapacitated) or notation that information about Advance Directives was given to the patient as required by Federal Law.

Advance Directives

The Patient Self-Determination Act (which includes Advance Directives) requires Primary Care West, PC to inform you of your rights as a patient and of our policies:

1. You have the right to make decisions concerning your medical care.
2. You have the right to accept or refuse medical or surgical treatment, including the right to formulate Advance Directives (declarations and/or durable powers of attorney for health care decisions).
3. You have the right to be given information concerning Advance Directives.
4. It will be documented in your medical record whether you have an advance directive or noted that information about Advance Directives was given to you.