

Takes effect in January

New law gives seniors more control over their living wills

By Brooke Adams The Salt Lake Tribune

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Maureen Henry heard the story more than once: Someone with a living will was admitted to the hospital with a heart problem and was promptly tagged with a "do not resuscitate" order.

The stories confirmed what she kept hearing from clients.

"There were a lot of people who feared they would be given up on and treatment not provided because they were old," said Henry, a former elder care attorney.

Henry changed the advice she gave out and then, as director of the Utah Commission on Aging, led the effort to revamp the state's living will law.

The new law, which takes effect in January, gives Utahns more control over what happens when they experience a medical emergency or face end-of-life decisions.

The law allows Utahns to fill out a single

form to designate who makes decisions when they are unable to, what medical treatment they want and when care should be withdrawn. Of those, giving someone power of attorney to act on your behalf may be the most critical, Henry said.

"The research is clear that having an agent who understands your wishes is the best way to get those wishes honored," she said.

Utah has had a living will law since 1986. Henry said that a recent CareSource Foundation survey found 64 percent of Utahns age 55 or older have a living will; 61 percent have a power of attorney.

Sen. Allen M. Christensen, R-North Ogden, described the existing law as a "disaster" during legislative hearings last winter.

The reason: It focuses on withdrawing treatment, not prolonging life.

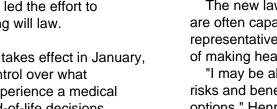
Under the new law, Utahns may pick a representative and an alternate, and specify how broad they want that person's authority to be.

The new law also recognizes that people are often capable of appointing a representative longer than they are capable of making health care decisions.

"I may be able to do that but not weigh the risks and benefits, complexities, of medical options," Henry said. "Even though people may be quite impaired [they] tend to have a strong view on it and they tend to be rational views."



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The new law also lets Utahns choose what action should be taken in a variety of situations, including progressive illness, dementia and a persistent vegetative state. One option: To prolong life regardless of condition or prognosis within reasonable health care standards.

"We tried to make it look more like the way people think and talk about these issues," Henry said.

One thing that has become apparent over the past several decades is the need to plan in advance for incapacity caused by such diseases as Alzheimer's.

"That directive could be in place and the decisionmaker could be working under that directive for many life decisions, not just end of life decisions," Henry said.

The law also strengthens a patient's right, when capable, to make medical decisions that cannot be overridden by a physician or a surrogate, she said.

Forms that incorporate provisions of the new law will be made available at hospitals, health clinics and senior centers, as well as on the Utah Health Department, Salt Lake County Aging Services and Commission on Aging Web sites.

Henry said that people who have already legally appointed someone to make medical decisions and filled out a living will don' t have to repeat the process - but she recommends they do.

"The reason is that . . . the old ones didn't work very well," she said.

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The old law: Focused on when to stop medical treatment.

* **The new law:** Creates one form for Utahns to specify who makes decisions when they are unable to, what medical treatment they want and when care should be withdrawn.

* What's next: The law takes effect in January; forms will be available at hospitals, clinics and senior centers, and on the Web sites of the Utah Health Department, Salt Lake County Aging Services and Commission on Aging.

