

	<h2>Understanding Your Choices for Medical Treatment</h2> <p>Maryland MOLST Training Task Force August 2013</p>

	<h2>Choices for Medical Treatment</h2>
	<p>For every medical test or treatment, it is important to understand the benefits and risks for you in your specific situation</p> 

	<h2>Considerations for Tests</h2>
	<ul style="list-style-type: none"> ■ Does the test rule out a medical condition? ■ Does the test monitor a treatment you are receiving? ■ Does the test check for side effects from a treatment? 

	<h2>Considerations for Tests</h2>
	<ul style="list-style-type: none"> ■ Does the test help your doctor decide on treatment options? ■ Does the test check the function of an organ? 

	<h2>Considerations for Tests</h2>
	<ul style="list-style-type: none"> ■ Does the test hurt? ■ Will I be awake during the test? ■ Does the test expose me to radiation? ■ Does the test screen for something that can be treated? ■ What are my goals for my health care?

	<h2>Considerations for Treatments</h2>
	<ul style="list-style-type: none"> ■ Does the decision need to be made right away or do you have time to think about it? ■ What are your potential benefits? ■ What are your potential risks, complications, and side effects? 

Considerations for Treatments



- Will a treatment cure a problem or just control a symptom?
- Does it limit my activities?
- Where is the treatment done?

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Your Health Care Decisions



- Your health care decisions are based on your preferences, values, and goals
- You may want to talk to close family members or friends
- You may want more information from your doctor or nurse practitioner
- You may want a second opinion from another doctor

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Cardiopulmonary Resuscitation (CPR)

- May include the following measures:
 1. Chest compressions
 2. Electric shock
 3. Mechanical ventilation on a breathing machine
 4. IV medicines through a vein

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Respiratory Support: Help with Breathing

- Oxygen and help with breathing may be given to you in different ways:
 1. Nasal cannula
 2. Face mask or non-rebreather mask
 3. CPAP or BiPAP
 4. Intubation

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Nasal Cannula

- A plastic tube with short tips that fits into your nose
- The plastic tubing wraps around your ears and down under your chin
- The extra oxygen gently blows into your nose

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Face Mask or Non-rebreather Mask

- A firm plastic mask that fits over your nose and mouth
- It is held in place with an elastic strap around your head
- It blows oxygen into your nose and mouth



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CPAP and BiPAP

- CPAP = continuous positive airway pressure
- BiPAP = bi-level positive airway pressure
- Used for people who still are breathing on their own, but need help to breathe
- A firm plastic mask fits tightly over your nose and/or mouth and blows air into your lungs
- It keeps the small air sacs in the lungs (alveoli) open to let oxygen get into your body

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Intubation

- A hard plastic tube is put through your mouth and into the top of your lungs
- The tube is connected to a machine called a ventilator that helps you breathe
- The tube is taped to your face
- You cannot talk or eat while the tube is in place
- You may be sedated with medications while on a ventilator

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Cardiac Support: Help for Your Heart

- Your heart may need different types of help to keep beating:
 1. Chest compressions
 2. Cardioversion
 3. Defibrillation
 4. Pacemaker

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Chest Compressions

- Someone presses down on your chest to compress your heart and help pump blood through your body



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Cardioversion

- A small electrical shock to try to get your heart beating normally again

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Defibrillation

- An electrical shock to try to get your heart beating normally again

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Pacemaker

- A pacemaker can be used short-term on the outside of your body and long-term inside your body
- The pacemaker sends small electrical signals to your heart to help it beat normally

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Do Not Resuscitate (DNR)

- If you have a DNR order and your heart stops or you stop breathing, you will be allowed to die naturally
- You may still receive treatment for other conditions prior to a cardiac or pulmonary arrest

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Life-Sustaining Treatments

- In addition to supporting your heart and lungs, other treatments to sustain your life may include:
 1. Transfusion of blood products
 2. Antibiotics and other medications
 3. Artificially administered feeding and hydration
 4. Dialysis

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Transfusion of Blood Products

- Giving whole blood, red blood cells, plasma, or platelets to you through an IV in your vein
- All blood products are carefully screened so that diseases are not passed from one person to another
- You only receive blood types that your body will accept

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Parts of Whole Blood



1. Red blood cells: Cells that carry oxygen to your lungs. Given to some people with severe anemia, a low red blood cell count
2. Plasma: Contains clotting factors that help your blood to clot
3. Platelets: A particle that helps your blood to clot

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Taking Medicines



- Oral: The tablet, capsule, or liquid is swallowed
- Sublingual: A very small amount of liquid or a small tablet is put in your mouth and gets absorbed through the mucous membranes
- Subcutaneous: A very small needle is placed under your skin, but not in a vein; small doses of some medicines can be given this way

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Receiving Medicines

- Intravenous: A small needle and a catheter are put into your vein; the catheter is left in place to give medicines or fluids
- Rectally: Medicine is put into your rectum and gets absorbed into your body

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Types of Intravenous Methods

- There are several intravenous methods to get medicine and fluids into your body through veins
 1. IV
 2. PICC line
 3. Central line
 4. Indwelling port

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IV (Intravenous Catheter)

- A small needle and catheter are put into your vein
- The needle is removed and the catheter is left in place for several days
- It can be used for medicines or fluids



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PICC Line

- PICC = peripherally inserted central catheter
- It is a long, slender, small, flexible tube that is inserted into a vein in the upper arm
- The catheter is then advanced until the tip is in a large vein in the chest near the heart
- You may be able to go home with a PICC line with nurses monitoring it periodically
- It can stay in for several weeks or months

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Central Line

- A central line is a larger catheter that goes into the femoral, subclavian, or jugular vein
- It is a large IV that is used in the hospital
- It can stay in for about a week

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Indwelling Port

- An indwelling port is a special reservoir that is placed inside your body during a surgical procedure
- It is usually used to give chemotherapy or other special drugs
- It can stay in your body for many months

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Artificially Administered Feeding and Hydration

- Sometimes a person cannot take in enough fluids and food through their mouth, so other ways are used to get nutrition into their body
- It is called "artificial" because the food is not swallowed by the person naturally

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Common Routes

- Subcutaneous
- Intravenous
- Nasogastric tube
- G tube, PEG tube, or J tube
- TPN

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Subcutaneous

- A small needle is put into your upper arm or thigh, but not in a vein
- Fluids and some medicines can be given this way
- Hypodermoclysis: The fluids are given to you under the skin (subcutaneously)
- This can sometimes be done in your home

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Intravenous

- A small needle and catheter are put into your vein; then the needle is removed and the catheter is left in place for several days
- If you are dehydrated or elderly, it is harder to place an IV



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Nasogastric Tube

- This plastic tube about the diameter of a woman's smallest finger goes through your nose, down your throat, and into your stomach
- It is used for food, fluids, and medicines
- It is very uncomfortable to get it placed, but once it is in you get more used to it

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Nasogastric Tube

- It is held in place by taping it to your nose and face
- It is a short-term way to get nutrition while in the hospital

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G Tube or PEG Tube

- G tube = gastric tube
- PEG tube = percutaneous endoscopic gastric tube
- Both are a flexible plastic tube smaller than the diameter of a woman's smallest finger

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G Tube or PEG Tube

- The tube goes through the side of your abdomen directly into your stomach
- You are sedated when it is placed during an endoscopy
- It is used for food, fluids, and medicines
- It can stay in place for many months and can be changed in a doctor's office or facility

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TPN

- TPN = total parenteral nutrition
- TPN is liquid nutrition given through a PICC line or central line
- It is generally only for short-term use and is not a substitute for nutrition long-term
- It requires regular blood tests for adjustment

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Dialysis

- Dialysis is done when your kidneys cannot filter waste products out of your blood. There are two ways it is done:
 1. Hemodialysis
 2. Peritoneal dialysis

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Hemodialysis

- A dialysis machine is used to filter waste products from your body and to add normal products into your body
- It usually requires that a surgeon make an AV fistula (arteriovenous), a special connection between a large artery and vein in your lower arm

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Hemodialysis

- Three times a week, you are connected to a dialysis machine for a few hours
- It is usually performed in a dialysis center

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	<h2>Peritoneal Dialysis</h2>
	<ul style="list-style-type: none"> ■ A dialysis machine is used to put fluid through a flexible catheter into your belly for a short time and then the fluid is removed ■ It removes waste products and adds in normal products ■ It requires a flexible catheter to be surgically placed in your belly
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	<h2>Peritoneal Dialysis</h2>
	<ul style="list-style-type: none"> ■ It is done every day ■ It may be done at home
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	<h2>Now What?</h2>	
	<ul style="list-style-type: none"> ■ You now better understand choices you may face now or in the future when you get sick ■ Discuss your options with your physician or nurse practitioner ■ Decide what medical treatments you want or do not want ■ Discuss your wishes with family members and close friends 	
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	<h2>Resources</h2>	
	<p>Your physician or nurse practitioner Physician assistants Social workers Local hospitals Local hospices Maryland Attorney General's Office Your lawyer</p>	
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	<h2>Health Care Decision Making Worksheet</h2>	
	<ul style="list-style-type: none"> ■ This is a worksheet for you to use during conversations about health care decisions ■ It is not an advance directive or an order sheet ■ You may take this form with you when you talk to your doctor or nurse practitioner ■ The worksheet is available at: marylandmolst.org 	
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	<h2>After You Make Health Care Decisions</h2>	
	<ol style="list-style-type: none"> 1. Make an advance directive to talk about medical treatments you want or do not want currently or in the future 2. Have your physician or nurse practitioner complete a Maryland MOLST order form for treatments that are relevant to your current medical condition 	
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Advance Directive

- An advance directive may have both or just one of the following sections:
 1. Living Will: Written instructions about medical treatments you want or do not want in the future
 2. Health Care Agent: Appoint someone else to make decisions about your medical care if you are unable to make your own decisions in the future

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Maryland MOLST

- MOLST = Medical Orders for Life-Sustaining Treatment
- It is an order form that is valid in all health care facilities and programs in Maryland



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Maryland MOLST

- This order form reflects your wishes on:
 1. Cardiopulmonary resuscitation
 2. Artificial ventilation
 3. Blood transfusions
 4. Antibiotics
 5. Artificial feeding and hydration
 6. Dialysis

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Maryland MOLST

- It includes orders about when you want to be transferred to a hospital or remain in your home or facility where you live
- It includes orders for how much and when you want more medical tests if you get sick

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Maryland MOLST

- Every time a physician or nurse practitioner completes a MOLST order form, you will receive a copy of it within 48 hours for your records or sooner if you are discharged or transferred

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In the Event of an Emergency

- Take your Advance Directive and Maryland MOLST order form with you every time you go to a new physician, the Emergency Room, a hospital, or any other health care facility



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For More Information

marylandmolst.org

maryland.molst@maryland.gov

Paul Ballard, Assistant Attorney General
410-767-6918

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