Understanding Your Choices for Medical Treatment

Maryland MOLST Training Task Force
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Choices for Medical Treatment
For every medical test or treatment, it is important to understand the benefits and risks for you in your specific situation

Considerations for Tests
- 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?

Considerations for Tests
- Does the test help your doctor decide on treatment options?
- Does the test check the function of an organ?

Considerations for Tests
- 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?

Considerations for Treatments
- 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?

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

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

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

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

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
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

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

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

Chest Compressions

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

Cardioversion

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

Defibrillation

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

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

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

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

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

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
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

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**

**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

**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

**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

**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
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.

Common Routes

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

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.

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.

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.

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.
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

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.

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.

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

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.

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

Peritoneal Dialysis
- It is done every day
- It may be done at home

Now What?
- 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

Resources
- Your physician or nurse practitioner
- Physician assistants
- Social workers
- Local hospitals
- Local hospices
- Maryland Attorney General's Office
- Your lawyer

Health Care Decision Making Worksheet
- 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

After You Make Health Care Decisions
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
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

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
- 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

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

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

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
For More Information

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