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## You learn by living pdf

This material should not be used for commercial purposes, or in any hospital or medical facility. Non-compliance can lead to legal action. A living will be a type of written legal document called a medical directive in advance. It describes the medical care you want in certain situations. Some medical procedures can prolong your life even if recovery is not possible. If you are unlikely to recover, a live company can list the treatment you want and don't want. Why would I want to have a living will? If you are in a hospital, you or your family will be asked if you have any preliminary directives such as live will be. If you do not have a living will or other pre-directive, your health care providers may give you treatment to prolong your life. They can give you treatment you don't want. You can live for months or years with these treatments, but not be conscious or knowledgeable. You may limit treatment, but your family may want you to have all the treatments. If you have a desire for a living, your health care providers can follow your wishes for treatment. When will life take effect? You can't make your own medical decisions: Your life takes effect when you can no longer let health care providers know what kind of care you want. Depending on the condition you live in, 1 or 2 doctors must decide that you can no longer make medical decisions. You may not be able to tell you what you want. You may not be able to understand the choices you need to make about your health care and the consequences of your choices. You have an incurable disease: Doctors must also decide that you have a terminal or other condition that falls under the law of life of your state. Each state can identify an incurable disease in different ways. Your condition may use terms such as a permanent unconscious state (not awake or known), or an irreversible state (a condition that will not be better). Your state may have other rules that control when life takes effect. You are in a vegetative state: the living will also be in effect if you remain in a long or permanent vegetative state. Vegetative state means that your mental functions are reduced or lost, but your basic body functions are still working. Your mental functions include your ability to think, be aware, or be completely conscious or awake. Your health care providers will not expect you to restore these functions if you are in a vegetative state. You will not be able to communicate, interact with other people or live as before. Severe traumatic brain injury can lead to a persistent or permanent vegetative state. What do I need to think about when I cook my living life? Ask your doctor to write out sheets or forms to help you write your living statement. This will help you prepare written instructions of your living will for your care at the end of life. Life, about situations where you can limit your medical procedures. Treatment options include: All treatments to try to save your life. All procedures but stop them if they do not work for a certain time. Only procedures that do not cause pain or discomfort. Only palliative (comfortable) help. Comfort care provides medications to take away the pain, but no treatment to save or prolong your life. What treatments can be covered in a living will? With live will, you can make decisions to have or not have a cure to prolong your life. You can do this before you need them. You can stop, limit or not have certain medical procedures. Think about how you want to feel and how long you want to be able to live. For example, you may be willing to have some pain with treatment if it allows you to live longer. You can refuse or discontinue treatment that prolongs life, but cause you constant or severe pain. Some of your treatment options include: Treatment types: Identify treatments you always want to get, such as painkillers. Identify procedures you never want to have, such as long-term ventilator care or dialysis. Short-term and long-term treatments: You can have short-term treatments when there is a good chance that you will get better. For example, you can feed the tube for a short time while you recover from surgery. You may not want a permanent power tube if you have a severe and long-term brain injury. You may have a limit on the amount of time you want to have other life-resistant treatments. Invasive tests and treatments: Invasive tests and treatments can be inconvenient or painful. These may include laboratory tests, blood transfusions, antibiotic treatment and surgery. These tests and treatments can prolong your life even if recovery is no longer possible. Feeding pipes: Health care providers may also treat tube feeding as artificial nutrition and hydration. Whether you are unconscious or unable to swallow, feeding the tube gives you the fluids and nutrients you need to stay alive. Medical professionals put a tube in the stomach to do so. Life support: Life support treatment can take over when some of your organs no longer work. If you cannot breathe on your own, you may need a ventilator. If your kidneys stop working, you may need dialysis to remove waste from your blood. PPC and DNR: Health care providers use CPR to try to restart your heart if it stops beating. electroshock is used. Consider when and how long you want CPR if you have an incurable disease or are in a prolonged coma. If you don't want CPR, you can add DNR (don't resuscitate) order in your life will. A copy of the DNR order should also be in your medical records. In what situations can I limit treatment? Think about the following situations. Then think about You would like if there is little chance that you will get better: You can't walk, but you can use a wheelchair. You have constant and severe nausea (indigestion) or diarrhea. You can't control when you urinate or defecate. You need medical professionals to feed, bathe and help you with the toilet. You have to use the fan to breathe. You have to use a feeding tube to eat. You need kidney dialysis to live. You can't think or communicate well. You no longer know your family or friends. You are in constant or severe pain. Does life forms allow me to express my values, beliefs and quality of life preferences? It is not possible with a living will to determine what your desires may be for each end of life situation. Your live will include important ones. Think about your answers to these questions: What would you like to do if you were in a long-term coma or a permanent vegetative state? What are your concerns about the end of your life? Is it important to have pain? Or do you want to stay informed and alert even if you are in pain? What do you want others to know about your religion or beliefs? Do you have certain practices in your religion, such as prayers or blessings, that you want to follow before you die? What kind of support do you want at the end of your life? Who do you want from you? Want to be at home or in a hospice? Where can I get life to be shaped? Your hospital and medical professionals must have forms or sheets that are used for your state. Each state has rules for the life of the will and other advanced directives. Most states allow the use of expanded directives prepared in one state, in another state. You can still create living wills for more than one state if you travel frequently or spend time in another state. How to prepare the living will be? Talk to your family and health care providers about your wishes. They will have questions for you. These questions can help you better prepare your life going. Your doctor may disagree with your wishes. If this happens, you will need to find another health care provider to help you. Look at treatment options. Ask your health care providers to explain everything you don't understand. Write down any other end-of-life instructions you want to follow. This includes burial or cremation, and whether you want to be at home or in a hospice when you die. What are the legal requirements for subs noting at the living wage? Sign your life will be in accordance with the rules of your state. Many states require at least one witness to watch you sign the form. The witness must be someone who is not your relative, medical services or legal agent. Some states will not accept your life as valid without the right witnesses. Proconst with your lawyer if you are unsure of the state laws for the life of the will. How can I make sure that my desires desire Tell health care providers, family or friends that you have a live will. When you're done writing your life will, talk to your family and health care providers about it. This will help everyone understand your wishes. Keep the card in your wallet or purse that says you have a live will. Keep the original and make copies of your life will. Keep your life will be the original document in a safe place that is easy to find. Don't hang your living will in your house or in a bank safe. Give your health care providers and family members copies of your living will. Make sure that health care providers make a current copy in your medical records where you get help, such as at the hospital. Consider other places to keep copies of your live will. Some states have registries that keep copies of your live will and other preliminary directives for you. Some services allow health care providers to access your live will using your computer. Your church or house of worship may also be able to store a copy of your living will for you. When should I reconsider my living will? You can always change or cancel your life will. To do this, fill out new lives will form according to the rules of your state. Once the changes are made, give a copy of the new living will be for your family and health care providers. Browse your life will be whenever one of the following happens: Decade: You start each new decade (10 years) of your life. Death: Someone near you is dying. Divorce: You are divorcing or there are changes in your family or personal relationship. Diagnosis: Health care providers diagnose (find) a serious illness or health problem. Decline: Your health is deteriorating and you find it harder to take care of yourself. Additional information This information is not legal advice. For more information contact: Care Connections National Hospice and Palliative Care Organization 1731 King Street, Suite 100 Alexandria, VA 22314 Phone: 1-800 - 658-8898 Web address: Care Agreement you have the right to help plan your treatment. To help with this plan, you need to learn about the living will and how they are used. You can then discuss treatment options with your health care providers. Work with them to decide what kind of care will be used to treat you. You always have the right to refuse treatment. The above information is only educational help. It is not intended as a medical consultation for individual conditions or treatment. Talk to your doctor, nurse or pharmacist before following any medical regimen to see if it is safe and effective for you. © IBM Corporation 2020 Information end-users only and cannot be sold, redistributed or otherwise used for commercial purposes. All illustrations and images included in CareNotes® are owned by A.D.A.M., Inc. or IBM Watson HealthAlways to make to displayed on this page relates to your personal circumstances. Medical disclaimer you learn by living eleanor roosevelt pdf. you learn by living quotes. you learn by living book. you learn by living summary. you learn by living free pdf. you learn by living epub. you learn by living review. can you learn a language by living in the country

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