

Advance Directives They help us tell our relatives what kind of

healthcare we wish to receive.

Many people are concerned that, in case of an accident or disease, others would be in charge of making decisions about their healthcare. Advance directives help us ensure we will receive the medical care we want if we are no longer capable of expressing our wishes.

WHAT IS AN ADVANCE DIRECTIVE?

It is a legal document containing clear instructions on your healthcare, to be used when you are unable to make decisions or express them.

Law No. 160 of November 17, 2001, the Advanced Statement of Will Regarding Medical Treatment Act, acknowledges the right of all persons of legal age and in full use of their mental faculties to state their will in advance regarding medical treatment, in case they suffer a terminal health condition or persistent vegetative state.

For an advance directive or advance statement of will to be valid, you must be at least 21 years old and be mentally able to make decisions regarding your care. Should you suffer any health condition that does not allow you to express yourself, your caretaker or guardian will use the directives to make decisions about your treatment. This document helps you take more control over a difficult situation and offers support to your caretaker or relatives in a moment of much emotional distress. Advance directives also allow you to appoint a proxy that can make decisions on your medical care.

UNFORESEEN SITUATIONS

If you do not have a statement on how to proceed with your treatment, or your condition makes it impossible for you to express your wishes, pursuant to Puerto Rican law, the adult, spouse, or caretaker over 21 years old who is closest to you will be consulted to make decisions on your treatment.

REQUIREMENTS

Pursuant to the law, an advance statement of will must meet the following requirements:

- 1. It must state the intent or will of the declarant, issuing orders to the physician or health care facility in charge of their medical treatment regarding which treatments the declarant wishes to receive or prohibit. For instance, whether or not you wish to be submitted to extraordinary measures like resuscitation, connection to a ventilator, or feeding by intubation.
- 2. Appointment of a person to make decisions regarding the acceptance or rejection of treatment.
- 3. It shall be in writing, signed, and sworn before an attorney. It may be drafted before a physician and two witnesses who are neither heirs nor involved in the patient's direct care.
- 4. It shall establish that the statement is made voluntarily.
- 5. It shall establish the date, time, and place where the statement was made.
 - Once the document is completed in its entirety, it is important that you deliver a copy to your physician or health care facility. It should be promptly included in your medical record. This statement of will may be revoked at any time in writing or verbally.

