Ambulatory Clinic Policy and Procedure

Title: ADVANCE DIRECTIVES AND FAMILY PARTICIPATION IN PATIENT CARE DECISIONS

Policy Number: EP 6.18

Regulation Health & Safety Code § 166 and 25 TAC 157.25
Reference: 
Effective Date: 04/2023

Policy Statement:

It is the policy of the Texas Tech Physicians of El Paso to respect patient wishes regarding the inclusion of family members and/or significant others in their care and treatment decisions, and to provide resources to assist patients and those others with healthcare and end-of-life decisions and the needed documents for formalizing the patient’s wishes.

Scope and Distribution:

This policy applies and will be distributed to all Texas Tech Physicians of El Paso ambulatory clinics.

Procedure:

A- Family participation

1. To the extent that the patient agrees and approves family and/or significant others may be contributors in obtaining patient history, participate in patient education, and be included in the development and implementation of patient treatment plans.

2. When family members or significant others participate in significant patient care decisions or instructions, documentation in the Medical Record should reflect his/her role.

3. If the patient is incompetent to make decisions, the person legally authorized to make health-care decisions for the patient is responsible for determining the extent of family or significant other participation in the development and implementation of patient treatment plans.

B- Advanced Directives

1. Patients will be provided information and forms for use regarding Advance Directives upon request by the patient or physician. A referral to a social worker may be initiated to assist in formalizing/documenting advanced directives. Appendices to this policy can be used to assist the patient with this process.

   *NOTE: At no time will clinic personnel or healthcare providers give legal opinions or advice suggesting the appropriate decision in executing Advance Directive documents.

2. All patients when signing the Consent to Treatment/Health Care Agreement form will note if they have an “Advance Directive.” If the answer is yes, they will be asked to provide a copy to be
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kept in their medical record and communicate it to their provider. **If the answer is no,** they will be instructed to communicate to their provider if interested in having one. Any Advance Directive document will be scanned into the medical record under the label Advance Directive.

3. The provider who anticipates impending circumstances requiring decisions regarding future medical care, including end-of-life decisions, will discuss these issues with the patient and family and provide guidance on formalizing/documenting an advance directive. The provider may not require that any particular form be executed. If the patient fails to document his/her wishes, the provider should document any specific wishes voiced by the patient in the medical record.

4. It is the provider’s responsibility to document in the medical record when a patient suffers from a terminal or irreversible condition as defined on the first page of the “Directive.” See 6.18.A, Directive to Physicians and Family Surrogates (English) or 6.18. B A.1, Directive to Physicians and Family Surrogates (Spanish).

5. An advanced Directive can be revoked at any time.

6. Out of Hospital Do Not Resuscitate Procedure.

   a. The attending physician will complete and sign the “Physician’s Statement” and/or Section “D”, when appropriate, of 6.18.E Out-of-Hospital Do Not Resuscitate (OOH-DNR) Order, form as requested by the patient or if the patient is incompetent, the patient’s legally authorized representative. (6.18 F Out-of-Hospital Do Not Resuscitate (OOH-DNR) Order Spanish)

   b. The physician completing the OOH-DNR shall note the existence of the order in the patient’s medical record.

   c. It is the policy of Texas Tech Physicians of El Paso to honor a valid OOH-DNR order presented at the time of an end-of-life event. A valid OOH-DNR form includes the following:

      i. Completed statutory form including the names, signatures and other information required of persons executing or issuing or witnessing the order;
      ii. A date for the issuance or execution of the form; and
      iii. Signatures of the patient or legally authorized representative executing or issuing the order and the attending physician. A copy of the original OOH-DNR order is acceptable.

   d. Texas Tech Physicians of El Paso shall also honor an acceptable OOH-DNR identification device. The following are considered acceptable devices:

      i. An intact, unaltered plastic bracelet with the word “Texas” (or a representation of the shape of Texas and the word “STOP” imposed over the shape) and the words “Do Not Resuscitate”; or
      ii. An intact, unaltered metal bracelet or necklace with the words “Texas Do Not Resuscitate-OOH”.
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e. When an end-of-life event appears imminent and an OOH-DNR order or device is presented or an applicable Advanced Directive is present, the provider should:

i. Establish the identity of the person as the person who executed or issued the OOH-DNR order;

ii. Determine that the OOH-DNR is valid as set forth in paragraph “c” above;

iii. Call EMS to assess and transport the patient as appropriate to the nearest emergency department;

iv. Move the patient and family to a private area and provide comfort measures until EMS arrives;

v. Assure that the OOH-DNR order or device accompanies the patient when transported to the ED;

vi. Note the event in the medical record.

f. An OOH-DNR order can be revoked by the patient or the legal representative who issued the order on behalf of the patient at any time.

g. Texas Tech Physicians of El Paso will not honor an OOH-DNR of a person known to be pregnant or if there are any indications of unnatural or suspicious circumstances. Under these conditions, the provider shall begin resuscitation efforts and call 911 to have the patient transported to the nearest emergency department.

h. When a patient inside the clinic (i.e., exam room) expires with a valid OOH-DNR, Texas Tech police must be notified. The family of the patient will be consulted regarding disposition of the body.

7. A Texas Medical Power of Attorney (MPOA) allows a person to select someone else to make health decisions on their behalf. The principal can limit or give unrestricted powers to the agent to make any type of responsibility, including ending the principal’s life. Alternate agents may also be selected in the event the primary agent cannot perform this activity. (See 6.18 C MPOA English or 6.18 D MPOA Spanish). In Texas, a Medical Power of Attorney can be revoked in the following ways: You can revoke a Medical Power of Attorney by notifying either the agent or your health care provider orally or in writing of your intent to revoke. You can also revoke a Medical power of Attorney by executing another one. Additionally, if you have designated your spouse to be the agent, then a later divorce revokes the Medical Power of Attorney.

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