

## ADVANCE DIRECTIVES

### **Level One - Supportive / Comfort Care**

This includes, but is not limited to, the provision of measures available within the resources of the facility such as:

- relief of pain;
- administration of oral fluids
- positioning;
- mouth care;
- treatment of fever;
- oxygen administration (if available);
- suctioning.

Diagnostic interventions and transfer to hospital will not normally be utilized for residents who request this level of Advance Directives. No cardiopulmonary resuscitation is requested.

### **Level Two - Limited Therapeutic Care**

Care measures will include all procedures utilized in Supportive/Comfort Care as well as the administration of antibiotics if indicated. Transfer to hospital may be arranged to provide measures of comfort or treatment that cannot be given at the facility according to the direction of, and at the discretion of, the physician. No cardiopulmonary resuscitation is requested.

### **Level Three - Transfer to Acute Care Hospital**

If symptoms indicate, the resident would be transferred to an acute care hospital for treatment. Assessment should be made in the acute care hospital emergency department and a decision made whether to admit the resident or return him/her to the Extencare facility. No cardiopulmonary resuscitation is requested and no admission to an acute care intensive care unit.

### **Level Four - Transfer to Acute Care with CPR**

Transfer to an acute care hospital will be arranged immediately. Cardiopulmonary resuscitation (CPR) will be provided by qualified staff, if available, and by ambulance personnel.

Substitute Decision Maker : _____ <div style="text-align: center;">Print name</div>
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\_\_\_\_\_  
Resident / substitute Decision Maker Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician Signature

\_\_\_\_\_  
Date