

## **The Catholic Doctor is In**

### ***In Case I'm Alive – Please Read***

#### ***Instructions at the End of My Life***

Living Will. Physician Orders for Scope of Treatment (POST). Advanced Medical Directive. Physician Orders for Life-Sustaining Treatment (POLST). Health Care Proxy. Health Care Surrogate. Durable Power of Attorney. Health Care Representative. What does it all mean? Do I *need* one of these? *Should* I have one of these?

The short answer is no, you should not have *one* of them; you should have *two* of them.

Since 1990, Federal Law requires hospitals to inform patients of their right to accept or refuse medical treatment and their right (but not requirement) to present documents spelling out how they want to be cared for should they become incapacitated.

The list of documents above boils down to two types: one (first four examples) that states principles that you would like followed for your medical care and one (last four examples) that appoints a person or persons to make decisions for you if you are unable to. Either of these alone is insufficient; both together form a strong team.

Just as the Bible does not interpret itself and needs a living and authoritative interpreter in the Magisterium of the Church, so your written document cannot be specific enough for all situations and needs to be applied by an authoritative and trustworthy interpreter committed to the Catholic understanding of Human Dignity. Sometimes, representatives have legal responsibility only when patients are unconscious, but they also may have primary responsibility when patients are conscious but permanently unable to make rational decisions – as for patients with dementia.

Many people have their spouse as their primary Health Care Representative and another trusted family member or friend as a back-up. Whoever you choose and whatever document you fill out, there are five topics you should address in writing and in discussions.

#### ***Pain Relief***

While human suffering possesses a redemptive nature, we are not required to endure as much pain as possible. The Catholic Church supports the goal of keeping patients as free of pain as possible. In fact, pain killers may make a patient unconscious or even hasten death

unintentionally. Sometimes, though, a certain amount of pain must be tolerated so that patients are not deprived of the right to prepare themselves with full consciousness to meet Jesus Christ.

### *Ordinary vs. Extraordinary Care*

Catholics are not required to use all available means to prolong life. Every form of medical treatment can be ordinary or extraordinary given the proper conditions. Because of the fluid nature of illness and the almost unlimited scenarios that can arise, it is impossible to foresee all the different potential care decisions ahead of time. Instead of trying to detail these in a document, it is best to discuss different situations ahead of time with your physician and your representative.

### *Providing Nutrition and Hydration*

Unlike the secular medical community that views artificial nutrition and hydration as *medical treatment*, the Catholic Church views nutrition and hydration on the same level as shelter and clothing - *normal care*. Blessed Pope John Paul II stated that “administration of water and food, even when provided by artificial means. . . is morally obligatory” until it is seen that life will end imminently. A consistently Catholic Advanced Directive would presume that artificial nutrition and hydration are a given - not an option - unless certain uncommon and excessively burdensome conditions arise.

### *Prohibiting Euthanasia*

As Catholics we are preparing for life-everlasting with God. In preparing to meet him, it does not make sense that we would ask someone to kill us by euthanasia. As Pope John Paul II wrote in *Evangelium Vitae*

“To claim the right to... euthanasia, and to recognize that right in law, means to attribute to human freedom a perverse and evil significance: that of an absolute power over others and against others. This is the death of true freedom.”

### *Providing for Spiritual Care*

Finally, we must make provision for the most important medicine, spiritual medicine. For the good of our souls, we desire the three final sacraments of Confession, Anointing, and Holy

Communion so that our sins are forgiven, our suffering is eased, and we are given Bread for the journey Home (Viaticum). The power of these three final sacraments intensely unites us with Christ and provides “a solid rampart for the final struggles before entering the Father’s house” (CCC 1523).

For more information and a fill-in-the-blank Indiana Catholic Health Care Directive that includes both these key principles *and* a place to designate health care representatives, go to [www.indianacc.org](http://www.indianacc.org) – click ‘resources’ on the left – open the first document under ‘Health Care’.

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