Archdiocese of Santa Fe Advanced Medical Directives

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OFFICE OF THE ARCHBISHOP

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Dear Friends in Christ,

This document contains two parts. Part I is a summary of basic Catholic teaching concerning Medical Ethics. Part II is a legal document, Advanced Medical Directives which I provide for your consideration in case of serious illness. The Advanced Medical Directives form allows you, while having capacity, to execute a power of attorney for health care which authorizes the agent to make health-care decisions you could have made while having capacity.

I am grateful to the Diocese of Phoenix for providing a document which we have adapted for our use. Our Archdiocesan Attorney, Juan L. Flores, has reviewed and approved the document as being in compliance with New Mexico law.

I suggest that, if you choose to use it, after you sign the document you provide copies of it to your family attorney and health care providers.

Sincerely yours in the Lord,

Most Reverend John C. Wester

Am C. Wester

Archbishop of Santa Fe

Part I Summary of Catholic Medical Ethics

We have prepared the enclosed document for use as an Advanced Medical Directives in the form of a Power of Attorney for medical affairs. This document is in accord with the Statutes of the State of New Mexico. After careful study and consultation we do not believe that a "Living Will" is an effective or necessary document. Thus we are not encouraging the use of "Living Will" documents.

The enclosed Advanced Medical Directives was developed following guidelines of two major Church documents; the fourth edition of the *Ethical and Religious Directives for Catholic Health Care Services*, approved by the U.S. Bishops in 2001, and *Nutrition and Hydration: Moral and Pastoral Reflections* (1992) a resource paper written by NCCB Committee for Pro-Life Activities. Pertinent excerpts from these documents are as follows:

Ethical and Religious Directives – found in *The Fourth Edition the Ethical and Religious Directives for Catholic Health Care Services*, 2001.

- 55. Catholic health care institutions offering care to persons in danger of death from illness, accident, advanced age, or similar condition should provide them with appropriate opportunities to prepare for death. Persons in danger of death should be provided with whatever information is necessary to help them understand their condition and have the opportunity to discuss their condition with their family members and care providers. They should also be offered the appropriate medical information that would make it possible to address the morally legitimate choices available to them. They should be provided the spiritual support as well as the opportunity to receive the Sacraments in order to prepare well for death.
- A person has a moral obligation to use ordinary or proportionate means of preserving his or her life. Proportionate means are those that in the judgment of the patient offer a reasonable hope of benefit and do not entail an excessive burden or impose excessive expense on the family or the community.
- 57. A person may forgo extraordinary or disproportionate means of preserving life. Disproportionate means are those that in the patient's judgment do not offer a reasonable hope of benefit or entail an excessive burden, or impose excessive expense on the family or the community.
- 58. There should be a presumption in favor of providing nutrition and hydration to all patients, including patients who require medically assisted nutrition and hydration, as long as this is of sufficient benefit to outweigh the burdens involved to the patient.

59. The free and informed judgment made by a competent adult patient concerning the use, or withdrawal, of life-sustaining procedures should always be respected and normally complied with, unless it is contrary to Catholic moral teaching.

Nutrition and Hydration: Moral and Pastoral Reflections (1992)

"The Judeo-Christian moral tradition celebrates life as the gift of a loving God, and respects the life of each human being because each is made in the image and likeness of God. As Christians we also believe we are redeemed by Christ and called to share eternal life with Him. From these roots the Catholic tradition has developed a distinctive approach to fostering and sustaining human life. Our Church views life as a sacred trust, a gift over which we are given stewardship and not absolute dominion. The Church thus opposes all direct attacks on innocent life. As conscientious stewards we have a duty to preserve life, while recognizing certain limits to that duty:

- 1. Because human life is the foundation for all other human goods, it has a special value and significance. Life is "the first right of the human person" and "the condition of all the others." [1]
- 2. All crimes against life, including "euthanasia or willful suicide", must be opposed. [2] Euthanasia is "an action or an omission which of itself or by intention causes death, in order that all suffering may in this way be eliminated." Its terms of reference are to be found "in the intention of the will and in the methods used." [3] thus defined, euthanasia is an attack on life which no one has a right to make or request, and which no government or other human authority can legitimately recommend or permit. Although individual guilt may be reduced or absent because of suffering or emotional factors that cloud the conscience, this does not change the objective wrongfulness of the act. It should also be recognized that an apparent plea for death may really be a plea for help and love.
- 3. Suffering is a fact of human life, and has special significance for the Christian as an opportunity to share in Christ's redemptive suffering. Nevertheless there is nothing wrong in trying to relieve someone's suffering; in fact it is a positive good to do so, as long as one does not intentionally cause death or interfere with other moral and religious duties. [4]
- 4. Everyone has the duty to care for his or her own life and health and to seek necessary medical care from others, but this does not mean that all possible remedies must be used in all circumstances. One is not obliged to use either "extraordinary" means or "disproportionate" means of preserving life that is, means which are understood as offering no reasonable hope of benefit or as involving excessive burdens. Decisions regarding such means are complex, and should ordinarily be made by the patient in consultation with his or family, chaplain or pastor, and physician when that is possible. [5]

- 5. In the final stage of dying one is not obliged to prolong life of a patient by every possible means: "When inevitable death is imminent in spite of the means used, it is permitted in conscience to take the decision to refuse forms of treatment that would only secure a precarious and burdensome prolongation of life, so long as the normal care due to the sick person in similar cases is not interrupted." [6]
- 6. While affirming life as a gift of God, the Church recognizes that death is unavoidable and that it can open the door to eternal life. Thus, "without in any way hastening the hour of death," the dying person should accept its reality and prepare for it emotionally and spiritually. [7]
- 7. Decisions regarding human life must respect the demands of justice, viewing each human being as our neighbor and avoiding all discrimination based on age or dependency. [8] A human being has "a unique dignity and an independent value, from the moment of conception and in every stage of development, whatever his or her physical condition." In particular, "the disabled person (whether the disability be the result of a congenital handicap, chronic illness or accident, or from mental or physical deficiency, and whatever the severity of the disability) is a fully human subject, with the corresponding innate, sacred and inviolable rights." First among these is "the fundamental and inalienable right to life." [9]
- 8. The dignity and value of the human person, which lie at the foundation of the Church's teaching on the right to life, also provide a basis for just social order. Not only to become more Christian, but to become more truly human, society should protect the right to life through its laws and other policies. [10]
- 9. While these principles grow out of a specific religious tradition, they appeal to a common respect for the dignity of the human person. We commend them to all people of good will.

Notes

- 1. Congregation for the Doctrine of the Faith, *Declaration on Procured Abortion* (Washington, D.C.: United States Catholic Conference, 1974), no. 11.
- 2. Second Vatican Council, *Pastoral Constitution on the Church in the Modern World* (*Gaudium et Spes*), no. 27. Suicide must be distinguished from "that sacrifice of one's life whereby for a higher cause, such as God's glory, the salvation of souls or the service of one's brethren, a person offers his or her own life or puts it in danger," Congregation for the Doctrine of the Faith, *Declaration on Euthanasia* (Washington, D.C.: United States Catholic Conference, 1980), part 1.
- 3. Declaration on Euthanasia, part 2.

- 4. See *Declaration on Euthanasia*, part 3; United States Catholic Conference, *Ethical and Religious Directives for Catholic Health Facilities* (Washington, D.C.: United States Catholic Conference, 1971), directive 29.
- 5. Declaration on Euthanasia, part 4.
- 6. Ibid.
- 7. Ibid., Conclusion.
- 8 Gaudium et Spes, no. 27; Declaration on Procured Abortion, no. 12.
- 9. Vatican Statement on the International Year of Disabled Persons (March 4, 1981), section 1, no. 1, and section 2, no. 1 in Origins 10:47 (May 7, 1981): 747-748.
- 10. Declaration on Euthanasia, Introduction; Declaration on Procured Abortion, nos. 10-11, 21; Congregation for the Doctrine of the Faith, *Instruction on Respect for Human Life in Its Origin* (Boston: St. Paul Editions, 1987), part 3.

Part II Advanced Medical Directives

New Mexico Health Care Power of Attorney Will To Live Form

I,
(print your name)
Address:
City/State/Zip
Designate (print agent's name)
(print agent's name)
Address:
City/State/Zip
Telephone
as my health care agent to make any health care decisions for me If the person I designated above is not willing, able, or reasonably available to make a health-care decision for me, then I designate the following persons (each to act alone and successively, in the order named): 1
(print successor agent's name above)
Address:
City/State/Zip
Telephone
2(print second successor agent's name above)
<i>d</i> ,
Address:
City/State/Zip
Telephone

My health care agent is authorized to obtain and review my medical records and information and make any health care decisions for me as authorized in this document consistent with the instructions below.

This designation shall become effective <u>only</u> when I become incapable of making and communicating my own health care decisions, as determined by two qualified health-care professionals. However, if I initial this box [], my agent's authority to make health-care decisions for me takes effect immediately. Any prior designation is revoked.

A. General Presumption of Life

- 1. I direct my health care provider(s) and health care agent to make health care decisions consistent with the teaching of the Catholic Church and with my general desire for the use of medical treatment that would preserve my life, as well as for the use of medical treatment that can cure, improve, or reduce or prevent deterioration in any physical or mental condition. If there is any question as to what the teaching of the Catholic Church is, I direct my agent to consult my pastor, or if he is unavailable, the Archdiocese.
- 2. Food and water are not medical treatment, but basic necessities. I direct my health care provider(s) and health care agent to provide me with food and fluids orally, intravenously, by tube, or by other means to the full extent necessary as long as this is beneficial to my health.
- 3. I direct that medication to alleviate my pain be provided, as long as the medication is not used in order to cause my death.
- 4. I also direct that I be provided basic nursing care and procedures to provide comfort care.
- 5. I reject, however, any treatments that use an unborn or newborn child, or any tissue or organ of an unborn child, who has been subject to an induced abortion. This rejection does not apply to the use of tissues or organs obtained in the course of the removal of an ectopic pregnancy.
- 6. I also reject any treatments that use an organ or tissue of another person obtained in a manner that causes, contributes to, or hastens that person's death.
- 7. The instructions in this document are intended to be followed even if suicide is alleged to be attempted at some point after signing.
- 8. I request and direct that medical treatment and care be provided to me to preserve my life without discrimination based on my age, physical or mental disability or the "quality" of my life. I reject any action or omission that is intended to cause or hasten my death.
- 9. I direct my health care provider(s) and health care agent to follow the above policy, even if I am judged to be incompetent.
- 10. I wish every effort to be made to obtain for me the ministry of a Catholic priest, so that I may secure the Sacraments of the Catholic Church. I wish my funeral to be conducted by a Catholic priest, according to the Liturgy and Laws of the Catholic Church.

B. When My Death is Imminent

If I have an incurable illness or injury, and I will die imminently – meaning that a reasonably prudent physician, knowledgeable about the case and the treatment possibilities with respect to medical conditions involved, would judge that I will live only a week or less even if the lifesaving treatment or care is provided to me – all medical and surgical treatments and tests (with the exception of pain relief, food and hydration) may be withheld or withdrawn.

C. When I Am Terminally Ill

If I have an incurable terminal illness or injury, and even though death is not imminent I am in the final stage of that terminal condition – meaning that a reasonably prudent physician, knowledgeable about the case and the treatment possibilities with respect to the medical conditions involved, would judge that I will live only three months or less, even if lifesaving treatment or care is provided to me – any medical or health care procedure that will not provide definite relief of symptoms (with the exception of pain relief, food and hydration) may be withheld or withdrawn.

D. If I Am Pregnant

If I am pregnant, regardless of the above conditions, I direct my health care provider(s) and health care agent(s) to use all lifesaving procedures for myself if there is a chance that prolonging my life might allow my child to be born alive. I also direct that lifesaving procedures be used even if I am legally determined to be brain dead if there is a chance that doing so might allow my child to be born alive.

Except as I specify by writing my signature in the box below, no one is authorized to consent to any procedure for me that would result in the death of my unborn child.

A copy of a written advance health-care directive, revocation of an advance health-care

directive or designatio original.	on or disqualification of a surrogate ha	as the same effect as the
Signed this	day of	
Signature		
Social Security No.		
Address		
City/State/Zip		
voluntarily dated and sgrantor.	the grantor who appears to be of soun signed this writing or directed it to be	dated and signed for the
Address		
City/State/Zip		
Address		