

Texas Health Surgery Center Bedford		Policy No.PR-2
Prepared by: LB	Approved by: MEC	Title – Ethics, Rights & Responsibilities PR-Advance Directives
Origin Date: 5/17		
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Policy:

It is the policy of Texas Health Surgery Center Bedford that during the patient’s episode of care at the center, if an adverse event occurs during the patient’s stay, based on reasons of conscience, all reasonable efforts will be taken to revive the patient, including resuscitative or other stabilizing measures, regardless of the contents of any advance directive/living will/health care proxy or instructions from a healthcare agent. The center will ensure that patients are fully informed of this policy prior to receiving any care. We will provide patients with information on applicable State health and safety laws relative to advance directives/living wills. Types of advance directives may include the following:

1. Living will
2. Durable health care power of attorney

Procedure:

1. Prior to the start of the procedure, the center will provide the patient or the patient’s representative with information regarding the center policy on advance directives. This information must include a description of applicable state health and safety laws relative to advance directives.
2. If requested by the patient or the patient’s representative, the center will provide the patient or the patient’s representative with official state advance directive forms. The center will maintain state specific information regarding advance directives to give patients upon request.
3. All patients will be asked whether or not they have executed an advance directive and their response will be documented in a prominent part of the patient’s current medical record.
4. When a patient or their representative indicates the patients has executed an advance directive, the center will remind the patient or their representative of the center’s policy for responding to adverse events during the patient’s episode of care at the Surgical Care Affiliates center.
5. When the patient presents with an advance directive, the center will inform the patient of the center policy and a copy of the advance directive will be placed on the medical record for reference *in the event* that the patient is transferred to an acute care facility.
6. If a patient indicates they have executed an advance directive and neglects to provide a copy, a note will be made in a prominent place in the medical record as to where the advance directive is on file.
7. If the patient chooses to seek alternative care due to the center policy, the center will provide the appropriate referral for the patient.

Links to state specific Advanced Directives: <http://www.caringinfo.org/stateadownload> or <http://www.noah-health.org/en/rights/endoflife/adforms.html> For Questions, contact SCA Legal Services at 1.800.768.0094 or 1.205.545.2627.

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References:

1. Surgical Care Affiliates (SCA) Patient Rights and Responsibilities-Outpatient, Diagnostic and Surgery, 2009. http://inside.scasurgery.com/reports/risk_management/hipaa/forms
2. The Joint Commission 2017 Standards for ASC's: Patient Rights Chapter.
3. Accreditation Association for Ambulatory Health Care, Inc., Accreditation Handbook for HealthCare 2017: Rights of Patient Chapter.
4. ASPAN Standards of Perianesthesia Nursing Practice 2015-2017: Position Statements: A Position Statement on the Perianesthesia Patient with a Do-Not-Resuscitate Adv. Directive.
5. AORN Standards, Recommended Practices, and Guidelines 2017: Position Statements: Perioperative Care of Patients with Do-Not-Resuscitate (DNR) Orders.
6. 42 Code of Federal Regulations §416.50(a)(2) effective May 18, 2009