

Guidance on the preparation of advance directives of wishes

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Willian L. Pacheco

Student of the Medicine Course, Life Sciences Area - Universidade do Oeste de Santa Catarina - Joaçaba, SC

Günter Sauerbier

Student of the Medicine Course, Life Sciences Area -Universidade do Oeste de Santa Catarina - Joaçaba, SC

Elcio L. Bonamigo

Professor of the Medicine Course, Life Sciences Area -Universidade do Oeste de Santa Catarina - Joaçaba, SC

1 INTRODUCTION

The autonomy of the person, when they are unable to communicate, occurs through the elaboration of their advance directives of will. In order to exercise this right, people with different levels of culture and mental capacity need different forms of filling models specially adapted to their understanding.

2 OBJECTIVE

Check models for the preparation of Advance Directives of Will.

3 METHODOLOGY

Search in the database Portal Capes, CAFe access, with the terms "Advance directives" AND "Model" in the title.

4 RESULTS

Twenty-two articles were found and the four that best suited the study were selected. In several countries, such as the United States, Canada and Spain, each state has a filling model. However, for Brazil, it is recommended not to directly use the American models or Spanish provinces, but to build one of their own, to be used only as a guide, due to the subjectivities of each patient (DADALTO, 2013). Furthermore, for the elaboration of Advance Directives of Will of patients with chronic obstructive pulmonary insufficiency (COPD), it is suggested to record the following specific situations: mechanical ventilation, intubation, cardiorespiratory resuscitation, means of life support, pulmonary rehabilitation and non-invasive mechanical respiration (COUCEIRO VIDAL; PANDIELLA, 2010). In addition to the free elaboration and use of a guide, previously mentioned, a



third model of elaboration of Advance Directives of Will was identified specifically for psychiatric patients, which requires the involvement of health professionals, their families, as well as an external mediator who guarantees the patient's word and seeks consensus in the decision; then, the document of Advance Directives of Will is elaborated; at the end, a copy of the document is delivered to each of those involved and another associated with the medical record (MAÎTRE, 2018). Another difficulty occurs in emergency situations, in which the patient may not be conscious, requiring a substitute to make these decisions; however, if he is conscious, the following steps are recommended in the preparation of his directives: a) determine the patient's decision-making capacity and recognize his values; b) identify the legal representative; c) record and transmit to the representative and the doctor the patient's decisions, especially on limitation of therapeutic efforts, order not to resuscitate and desire for donation or not of organs and tissues (LIMEHOUSE et al., 2012). In Brazil, the Brazilian Society of Geriatrics and Gerontology has an online application called "Minhas Vontades", through which people can fill out their advance directives of will (RBGG, 2020).

5 FINAL CONSIDERATIONS

Advance Directives of Will are the main record of a broader process that is Advance Care Planning. It can be filled out freely or guided by a facilitator model in which the person expresses their wishes and designates their representative. In the case of psychiatric patients, the participation of an external mediator is recommended. In all cases, it is essential to have the help of health professionals to help clarify to patients, representatives and their loved ones about the manifestations that will be included in the Advance Directives of Will so that there are no doubts about the decisions to be adopted.

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