



Renfrew Victoria Hospital

Dear Family Member:

Renfrew Victoria Hospital has adopted the policy related to Levels of Care Directives. The following four pages explain the four different levels of care.

Creating an Advance Directive is the same as a Living Will. By taking time now to think about your wishes it will ensure that your family, friends or power of attorney is aware of your wishes at a time when you are unable to speak for yourself.

Please take time to read the following pages, take time to learn about the options, ask questions, think about your decision and speak with your family members about your decision. You may also want to speak with your family physician, a religious leader or the social worker when making decisions. It is important to remember that any decision that you make can be changed at any time.

Please return the signed level that you feel comfortable with, to your physician or nurse. If a decision is unable to be made, Renfrew Victoria Hospital, under medical direction, will follow level four (4) – to do everything possible to maintain life.

If at any time you have any questions or would like to speak further with someone before you create your advance directive, please do not hesitate to contact the Renfrew Victoria Hospital at 613-432-4851 and ask to speak with a Registered Nurse in charge, the family physician in charge of caring for the patient, or a social worker, you may also decide to speak with a member of the clergy or a lawyer.

Warm Regards,

Renfrew Victoria Hospital Staff

*Renfrew Victoria Hospital
499 Raglan Street, North
Renfrew, Ontario
K7V 1P6*

Telephone: 613-432-4851

Fax: 613-432-8649

ADVANCE DIRECTIVE

PATIENT / RESIDENT:

DOCTOR:

LEVEL 1 – Palliative / 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
- Oral fluids
- Positioning
- Mouth care
- Treatment of fever
- Oxygen administration
- Suctioning

Diagnostic interventions will not normally be utilized for patients/ residents who request this level of advance directives.

NO CPR is requested.

Physician Signature

Patient/Resident Signature

Substitute decision maker name (if applicable)

SDM Signature (if applicable)

Date

Date

*Renfrew Victoria Hospital
499 Raglan Street, North
Renfrew, Ontario
K7V 1P6*

Telephone: 613-432-4851

Fax: 613-432-8649

ADVANCE DIRECTIVE

PATIENT / RESIDENT:

DOCTOR:

LEVEL 2 – Limited (Includes Palliative)

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

- Relief of pain
- Oral fluids
- Positioning
- Mouth care
- Treatment of fever
- Oxygen administration
- Suctioning
- Plus curative medications that can be given orally, most frequently antibiotics. Intravenous treatment only for comfort measures (hydration).

Do not transfer to Intensive Care Unit

NO CPR is requested.

Physician Signature

Patient/Resident Signature

Substitute decision maker name (if applicable)

SDM Signature (if applicable)

Date

Date

*Renfrew Victoria Hospital
499 Raglan Street, North
Renfrew, Ontario
K7V 1P6*

Telephone: 613-432-4851

Fax: 613-432-8649

ADVANCE DIRECTIVE

PATIENT / RESIDENT:

DOCTOR:

LEVEL 3 – Therapeutic Care (Includes Surgery)

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

- Emergency surgery, if necessary
- Relief of pain
- Oral fluids
- Positioning
- Mouth care
- Treatment of fever
- Oxygen administration
- Suctioning
- Plus curative medications, most frequently antibiotics.
- Intravenous treatment is provided.

NO CPR is requested.

If symptoms indicate, the patient/resident will have use of all resources available at the hospital EXCEPT for intensive care.

Do not admit to Intensive Care Unit.

Do not ventilate. (Except during and after surgery)

Physician Signature

Patient/Resident Signature

Substitute decision maker name (if applicable)

SDM Signature (if applicable)

Date

Date

*Renfrew Victoria Hospital
499 Raglan Street, North
Renfrew, Ontario
K7V 1P6*

Telephone: 613-432-4851

Fax: 613-432-8649

ADVANCE DIRECTIVE

PATIENT / RESIDENT:

DOCTOR:

LEVEL 4 – Intensive Care (Includes Surgery)

All interventions including CPR will be provided by qualified staff.

- Admit to Intensive Care, if necessary
- Ventilate, if required.
- Insert central lines, if necessary.
- Do everything possible to maintain life.

Physician Signature

Patient/Resident Signature

Substitute decision maker name (if applicable)

SDM Signature (if applicable)

Date

Date