



End of Life Goals

July 10, 2015



The best time to consider your goals for your future health care and end of life care is now and periodically over time. These goals will naturally change, reflecting one's current health status, treatment options, life situation and perhaps age. These goals must be documented in an advance directive and should be discussed.

Most medical care options are curative. When cure is no longer possible and the usual methods to manage a chronic condition are no longer as effective, it is time to consider another approach, hospice care. Hospice is a philosophy of care that focuses on the management of symptoms and pain while also attending to emotional and spiritual needs of the patient and their family.

In the United States the term and eligibility requirements for hospice are largely defined by Medicare. Eligibility requires a physician to certify that the individual has less than six months to live.

According to Honoring Choices Wisconsin, an initiative of The Wisconsin Medical Society, <http://bit.ly/1HOGxsU>, "eighty percent of people say that if seriously ill, they would want to talk to their doctor about end-of-life care, but only 7% report having had an end-of-life conversation with their doctor."

The philosophy of hospice care will naturally bring about the end of repeated hospitalizations and uncomfortable diagnostic tests and procedures. Hospice can be provided in the home or a facility, such as an assisted living community or specialty facility. Consider having this important conversation with your doctor or with a Stowell Associates' aging life care manager.

QUESTIONS?

If you know anyone who needs our services, please encourage them to call 414-963-2600; a highly qualified professional Care Manager is available to help.

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