

Will to Live: a 'general presumption for life'

The Will to Live/Durable Power of Attorney for Health Care Directive:

- **governs how you are treated** in almost every circumstance regarding lifesaving treatment, should you lack decision-making capacity;
- **names someone you trust** as your "health care agent." This individual will safeguard your life by making health care decisions when you are unable to yourself;
- **guides your health care agent** and physicians by supplying specific instructions as to what medical treatment you do and do not want;
- **provides proof of your wishes**, thus protecting your family and health care agent from pressure from health care providers; and
- **relieves health care agents** from the agony of critical decision-making.



Ensure protection for yourself and your family with a Will to Live

In Minnesota, the Will to Live/Durable Power of Attorney for Health Care Directive may be prepared with or without the assistance of an attorney. For more information about the Will to Live, or for a copy of the actual Will to Live legal document, visit www.mccl.org, call MCCL at 612-825-6831 or e-mail mccl@mccl.org.

In other states, contact NRLC at 202-626-8800 or www.nrlc.org/euthanasia/willtolive.



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The mission of Minnesota Citizens Concerned for Life is to secure protection for innocent human life from conception until natural death through effective education, legislation and political action.

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Why you need an Advance Directive



Minnesota Citizens Concerned for Life

You are at risk!

As the shocking case of the late Terri Schindler-Schiavo demonstrates, any of us who might become unable to speak for ourselves due to illness or disability is in **very grave danger of being denied lifesaving medical treatment** — even basic nutrition and water.

No more 'presumption for life'

The once-dominant view — that the presumption is for life unless it is clear that the patient would have rejected treatment — is now the law only in some circumstances in a very few states. Indeed, **nonvoluntary euthanasia** in the form of denial of food, fluids and lifesaving medical treatment to patients who have never expressed their wishes **is now standard in most of America.**

For this reason, making clear your desire to receive treatment and nutrition in a legally binding advance directive is extremely important.

There are several types of advance directives. The popular “living will” directs your attending physician to make medical treatment decisions should you be unable to do so.

But the person treating you at the time **may not be your family doctor who knows you and your values.** In addition, the “living will” is open

to various interpretations with which you may not agree. Many forms of the “living will” direct that you be denied food, fluids and lifesaving medical treatment.

Even if you don't want all possible measures taken if you are near death, **signing such a document is unwise**, because its ambiguous wording is likely to bring about your death in many more circumstances.

Use a Durable Power of Attorney for Health Care

MCCL strongly urges you instead to **use a pro-life Durable Power of Attorney for Health Care.** In this advance directive, you name someone to make decisions about your medical care when you are unable to do so, either temporarily or permanently.

MCCL has made available a pro-life Durable Power of Attorney for Health Care entitled the “Will to Live.” A “Will to Live” for Minnesotans is available from MCCL.

The Will to Live directs that you be given food and fluids, and **creates a presumption for treatment** with the opportunity to describe limited, specific exceptions, such as when you are dying. You name people who you trust to carry out these instructions.

What is the Durable Power of Attorney for Health Care?

A Durable Power of Attorney for Health Care (DPAHC) is an advance directive that enables a person to make provision for health care decisions in the event that he or she becomes unable to do so.

It is a signed, witnessed document in which **the signer names an agent or agents to make medical care decisions.** Unlike most living wills, the DPAHC does not require the signer to have a terminal condition.

The signer should carefully discuss his or her values, wishes and instructions with each agent before and at the time the document is signed. These discussions may continue afterward.

It is also important that each agent be willing to exercise his or her power and authority to make certain the signer's wishes are respected.