Word List

By learning more about common end-of-life terms and treatments, you can develop an Advance Care Plan that truly reflects your wishes. You may also wish to include some of these terms in your Advance Care Plan:

**Allow natural death** refers to decisions NOT to have any treatment or procedure that will delay the moment of death. It applies only when death is about to happen from natural causes.

**Cardiopulmonary resuscitation (CPR)** refers to medical procedures used to restart your heart and breathing when the heart and/or lungs stop working unexpectedly. CPR can range from mouth-to-mouth breathing and pumping of the chest to electric shocks that may restart the heart and machines that breathe for the individual.

**Comfort measures** are treatments to keep you comfortable (e.g., pain relievers, psychological support, physical care and oxygen).

**Dialysis** is a medical procedure that cleans your blood when your kidneys can no longer do so.

**End-of-life** care refers to health care provided at the end of a person’s life. This type of care focuses on you living the way you choose during your last days or weeks and providing comfort measures until the time of death.

A **feeding tube** is a way to feed someone who can no longer swallow food.

**Health care professional** is a person licensed, certified or registered in their province/territory to provide health care (e.g., a doctor, nurse or social worker).

**Informed consent** refers to the permission you give to health care providers that allows medical investigations and/or treatments. Health care providers are required to offer you, and you are entitled to receive, detailed explanations of the investigations/treatments and their risks, benefits and side effects; alternatives to these options; and what would likely happen if you refuse the options. They must also answer any questions you have about the treatments and the information
Intravenous (IV) is a way to give you fluids or medicine through a vein in your hand or another part of your body.

Life support with medical interventions refers to medical or surgical procedures such as tube feeding, breathing machines, kidney dialysis, some medications and CPR. All of these use artificial means to restore and/or continue life. Without them, you would die.

Life limiting illness refers to an incurable medical condition caused by injury or disease.

Palliative care is the way we care for people who have a life limiting illness. It focuses on providing good quality of life. In other words, keeping you as comfortable and free of pain or other symptoms as possible. Palliative care may involve medicines, treatments, physical care, psychological/social services and spiritual support, both for you and for those who are helping to care for you. Palliative care can be provided anywhere, at any stage of any illness along with care and treatment aimed at cure or prolonging life.

Substitute Decision Maker (SDM) is a person(s) who provides consent or refusal of consent for treatment or withdrawal of treatment on behalf of another person when that person is mentally incapable to make decisions about treatment. The Substitute Decision Maker(s) is required to make decisions for you following any wishes you expressed about your care when you were mentally capable. If your Substitute Decision Maker does not know your wishes applicable to the treatment decision to be made, he or she is required to act in your best interests.

Symptoms are signs that you are unwell (e.g., pain, vomiting, loss of appetite or high fever).

Terminal illness means an incurable medical condition caused by injury or disease. These are conditions that, even with life support, would end in death within weeks or months. If life support is used, the dying process takes longer.

A ventilator is a machine that helps people breathe when they cannot breathe on their own.