

Lillian

Background - Lillian is admitted to the emergency department. She is a 61-year old lady who has a blocked Ventro Peritoneal shunt, needing surgery. She is stable but unconscious. Medical assessment on admission reveals no major cardiovascular or respiratory problems and there is a clear clinical picture of the required course of action. "Directive" on record noted:

TO WHOM IT MAY CONCERN

I, Lillian HEREBY DIRECT that under no circumstances that should any surgery be undertaken upon me unless I have given specific written authorisation to do so.



.....
Date: (5 years ago)

Witness



Marie A. Torni
Legal Executive
Taunneu

Medical history on record:

- Congenital aqueduct stenosis ventro peritoneal shunt done 7 years ago. Spent 5 weeks in hospital.
- Extract from a clinic letter 2 months after surgery "...She was extraordinarily angry today. Apparently she would have refused medical treatment at the time of her incident and is very upset that she was treated..."
- Last clinic notes 6 months ago: recurrent falls, alcoholism, cognitive decline, obesity, deafness, hypertension and hypercholesterolemia

Additional information discovered:

- The legal executive who witnessed the "directive" 5 years ago is unable to recall or reproduce another record of it
- Told that she lived alone and was independent
- Family are upset by the idea that we would do nothing and let her die. When asked if they thought she would agree to an operation – "she probably would, but I am not sure..."

Issues for discussion

1. Is it a valid advance directive?
2. If it is not, do you need to consider it?
3. What should the treating clinician do in this case (if he does nothing Lillian will die)?
4. What would you do if Lillian was your mother?