EthicsRx
Practical Policy Guidance from the National Center for Ethics in Health Care

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## Rescinding an Advance Directive at a Remote Facility

Paragraph 13 of VHA Handbook 1004.02, *Advance Care Planning and Management of Advance Directives*, identifies the requirements for rescinding an advance directive (AD). When a Veteran with decision-making capacity revokes his or her AD, rescinding that AD ensures that the Veteran's future health care preferences are accurately documented in the electronic medical record. However, the requirements outlined in VHA Handbook 1004.02 only address situations in which the Veteran requests to rescind the AD at the same facility where it was entered into the record. Veterans often receive care at multiple VAs. The National Center for Ethics in Health Care (NCEHC) has received inquiries about how to rescind an AD when the Veteran indicates that it was entered into the record at a different – that is, *remote* – facility. Understanding how to rescind ADs at remote facilities can help to ensure that Veterans' health care preferences are accurately documented wherever they receive treatment.

**Follow these guidelines for rescinding an advance directive at a *remote* facility:**

1. Ask the Veteran to identify which facilities were provided a copy of the AD.
2. Confirm the facilities where the AD was entered into the record using VistA Web, CPRS Remote Data View and/or Remote VistA Imaging.
3. Use the "Advance Directive Discussion" note title to document in the local record that the Veteran wishes to rescind the remote AD. Make sure to include the date of the remote AD you are requesting to be rescinded, and the facilities where it is located.
4. Contact the identified remote facilities to request that they initiate rescinding the AD that was entered into the patient's record at their facility. If possible, complete this step with the Veteran present to ensure that the Veteran is a partner in his or her care and to allow for transparency in communications about the patient's care. (When attempting to identify a contact at a remote facility, it may be helpful to contact the individual who signed the remote "Advance Directive" progress note, the remote facility's Chief of Social Work or the remote facility's Chief of Health Information Management.)
5. Document communication with remote facilities in the local record using the "Advance Directive Discussion" progress note.
6. If the advance directive was entered into the chart at the local facility as well as a remote facility, follow procedures to also rescind the local copy of the advance directive, as outlined in VHA Handbook 1004.02 (paragraph 13).
7. Assist the Veteran in completing a new AD, if the Veteran desires. Follow the procedures outlined in VHA Handbook 1004.02 (paragraph 11) for documenting the new advance directive.
8. Give a copy of the AD to the Veteran and ask whether they would like assistance with providing copies to other facilities.

For additional information on advance care planning and advance directives, please visit the NCEHC policy page at http://vaww.ethics.va.gov/activities/policy.asp.

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