**Advance Care Planning**
Knowing your voice is heard when making decisions about health care is important. Advance Care Planning is the process of preparing for a time when you may not be able to make your own medical decisions. The best time to make these decisions is when you are able to make your own choices.

**Health Care Agent**
Discussing and sharing your wishes with your loved ones, health care team and health care agent is important. A health care agent makes health care decisions based on your wishes if you are unable to communicate.

**Health Care Directive**
By writing a Health Care Directive, you can make your voice heard so your wishes are followed. A Health Care Directive is a written plan outlining your values and priorities for your future medical treatment.

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**What is an ICD?**
An implantable cardioverter defibrillator (ICD) is a small device that is placed under your skin below your collarbone, and is connected to your heart by small wires.

When the ICD notices a dangerous heart rhythm, it will deliver a shock to your heart to restore your normal heartbeat. Shocks may be painful and may, on occasion, happen when they are not needed.

**How does it work?**
The ICD is surgically placed under your skin. The procedure may require a one night stay in the hospital. It has a battery which lasts between five and ten years. After the ICD is placed, you will have a visible “bump” (about the size of a small bar of soap) on your chest. Once the ICD is placed, it can be monitored or turned off without surgery.

**How effective is an ICD?**
An ICD will not make you feel better or cure your heart problems, but it will make living through a dangerous heart rhythm more likely. Some ICDs can also work as a pacemaker, helping keep your heartbeat regular. A five-year study looked at people with serious heart problems who qualified for an ICD. In the group of people who had an ICD placed, fewer people died (29 out of 100) in the five years. In the group of people who did not get an ICD placed, more people died (36 out of 100).

**Will an ICD work for me?**
Talk to your clinician about how well an ICD would work for you. You can also ask for additional information about the specific device recommended for you.

If you choose to have an ICD and are nearing death, you will continue to receive shocks as your heart fails. When you become old, frail or have a terminal illness, the ICD can be turned off to allow you to die a natural death. If you change your mind, your ICD can be turned back on. Surgery is not needed to turn the ICD off or on.

**What if I choose not to have an ICD?**
If your clinician has suggested an ICD, this means you have or are at risk of having a serious heart rhythm problem which could cause your heart to stop and you would die. With or without an ICD you can continue to use medicine to help control your heart rhythm. Your health care team will provide other treatments to keep you comfortable, manage pain and control symptoms so you can live as well as possible.

**How do I decide what’s best for me?**
Talk with your clinician and your loved ones about your medical and personal goals and values. Some questions to consider are:

- How do I feel about having a device implanted in my body?
- Is the thought of a shock from an ICD scary or reassuring?
- What is my quality of life now with my heart problems?
- Am I able to control my heart rhythm well now with medicine?
- What changes would affect my decision about having an ICD, or about turning it off if I have one?
- What are my concerns about living with, or living without, an ICD?
**What should I do after I decide?**

Let loved ones know your decision about an ICD so they can honor your choice. Be sure to document your choices about an ICD in a Healthcare Directive.

Also talk about your decision with your doctor and health care team. Your health care provider may recommend medical orders called **POLST (Provider Orders for Life-Sustaining Treatment)** that document your choices about an ICD and other health care wishes.

A POLST provides specific instructions for emergency medical responders and other health care providers. A POLST form is not a replacement for a Health Care Directive and does not name a health care agent.

Remember, your goals, values and priorities may change. Your health status may change, too. Revisit your decision about an ICD as you get older or your health changes.

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For more information about advance care planning or for help creating a Health Care Directive, contact your health care provider.