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The new law also lets Utahns choose what action should be taken in a variety of situations, including progressive illness, dementia and a persistent vegetative state. One option: To prolong life regardless of condition or prognosis within reasonable health care standards.

"We tried to make it look more like the way people think and talk about these issues," Henry said.

One thing that has become apparent over the past several decades is the need to plan in advance for incapacity caused by such diseases as Alzheimer's.

"That directive could be in place and the decisionmaker could be working under that directive for many life decisions, not just end of life decisions," Henry said.

The law also strengthens a patient's right, when capable, to make medical decisions that cannot be overridden by a physician or a surrogate, she said.

Forms that incorporate provisions of the new law will be made available at hospitals, health clinics and senior centers, as well as on the Utah Health Department, Salt Lake County Aging Services and Commission on Aging Web sites.

Henry said that people who have already legally appointed someone to make medical decisions and filled out a living will don't have to repeat the process - but she recommends they do.

"The reason is that . . . the old ones didn't work very well," she said.

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**The old law:** Focused on when to stop medical treatment.

* **The new law:** Creates one form for Utahns to specify who makes decisions when they are unable to, what medical treatment they want and when care should be withdrawn.

* **What's next:** The law takes effect in January; forms will be available at hospitals, clinics and senior centers, and on the Web sites of the Utah Health Department, Salt Lake County Aging Services and Commission on Aging.