United States Supreme Court case of Cruzan v. Director, Missouri Department of Health.  Paper details Review all materials in Chapter 52 and conduct research on the United States Supreme Court case of Cruzan v. Director, Missouri Department of Health, 497 U.S. 261 (1990). The full text of this case, along with numerous case briefs, commentaries, summaries, etc., may be found by simply entering the full name of the case into any major online search engine of your choosing. Alternatively, you may use Westlaw, Lexis or any other professional legal research databank in your research, however, use of such is not required. Following your research, review the following questions: • What was the ultimate numerical vote of the court? • When and how can life support be withdrawn? • How does death by refusal of treatment differ from suicide? • How does a living will work and when does it become of legal effect? • What is a health care directive and how does it work? After completing your research, summarize your answers, and, along with any other sources, if any, address and support your particular position/view on the following specific issues, and, specifically, how you would apply the Saint Leo University Core Values of Community, Respect, and Integrity into your actions. Be sure to use proper APA format for citations. 1. What are the potential foreseeable financial, psychological, and medical, yet unintended, harmful consequences to one’s family and friends in failing to provide a properly executed will and living will prior to one’s final illness and death? 2. What are the fundamental distinctions between recuperative medical care and palliative care? Who should be included in the decision to modify care from recuperative to palliative? When, if ever, is the right to refuse any and all medical care appropriate when such virtually ensures the death of the patient? 3. What professionals, medical or otherwise, should be involved in advising decisions concerning end-of-life wishes? How does euthanasia differ from a simple cessation of treatment? Who should make end of life decisions for those who are without a family member to take on such a role? 4. What measures can be taken to ensure the quality of ongoing family and social relationships, individually and as a group, to end-of-life patients? What pitfalls are to be avoided in ensuring maintenance of these relationships? What actions may be taken to ensure the spiritual and existential dimensions of the process are respected and integrated?