



CHOOSING AN ADVOCATE and PREPARING DOCUMENTS

I HAVE CHOSEN my advocate (or advocates). My advocate is _____.

- The person I have chosen can be readily available.
- My advocate has his/her own means of transportation.
- My advocate is comfortable speaking to doctors on my behalf.

I HAVE DISCUSSED my health care wishes with my advocate(s).

I HAVE DOCUMENTED my wishes using:

- A Medical Power of Attorney form (my named agent can be different from my advocate). My agent is _____.
- An Advance Directive (living will).
- A HIPAA Authorization form (allows doctors to share information with your advocates).
- A Do Not Resuscitate Order if applicable.

I HAVE GIVEN my advocate(s) a copy of my documents and I have the original documents in a safe location.

- My advocates know where to find my original documents, if needed.
- My original documents are located: _____
_____.