

### What are advance directives?

Advance directives are legal documents that allow people to communicate their decisions about medical care to family, friends, and health care professionals in the event that they are unable to make those decisions themselves—for example, due to being unconscious or in a coma. The two main types of advance directives are a [living will](#) and a medical [power of attorney](#).

### What is a living will?

In a living will, people indicate what kind of medical care, especially life-sustaining care, they would or would not like to receive if they become unable to speak for themselves. The most common types of care that are addressed in a living will include:

- The use of life-sustaining equipment (such as [dialysis](#) machines, [ventilators](#), and respirators)
- [“Do not resuscitate” \(DNR\) orders](#); that is, instructions not to use [cardiopulmonary resuscitation](#) (CPR) if breathing or heartbeat stops
- Artificial hydration and nutrition (tube feeding)
- Withholding food and fluids
- Organ and tissue donation

### What is a medical power of attorney?\*

A medical power of attorney is the advance directive that allows people to name another person to make decisions about their medical care if they are temporarily or permanently unable to communicate or make these decisions for themselves. (This document can also be known as a [“health care proxy,”](#) “appointment of health care agent,” or [“durable power of attorney](#) for health care.”) The scope of a medical power of attorney is not limited to choices at the end of life but also includes decisions in other medical situations. Generally, with a medical power of attorney, people appoint someone they know well and trust to carry out their wishes. This person may also be known as a health care agent, surrogate, attorney-in-fact, or health care proxy. The document goes into effect when a doctor declares that a person is unable to make his or her own medical decisions.

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

Patient Signature: \_\_\_\_\_

Do you have an advance directive? Yes or No (circle one)

If Yes, please provide a copy to the ASC to attach to your chart.

If No, are you interested in completing one? Yes or No (circle one)