

HEALTHCARE INSTRUCTIONS

The purpose of these instructions is for you to provide insight and direction for your Healthcare Power of Attorney in the event that they have to act on your behalf. These can be difficult ideas and scenarios to make decisions about but consider the peace of mind that you are providing for your Agent.

1. **Care providers.**

Use this section to provide contact information for your primary physician and any specialists. Additionally, please provide information on any preferences that you have for pharmacies, urgent cares, or hospitals.

2. **Medical Treatment.**

Use this section to outline the types of medical treatment(s) that you do and do not want.

3. **Pain Management.**

Do you wish to be given any form(s) of pain management? Does this depend on whether you have a short-term illness, long-term illness, are in a coma or persistent vegetative state, or have been declared brain dead?

4. **Artificial Nutrition & Hydration.**

Do you wish to be given any form(s) of artificial nutrition and/or hydration? Does this depend on whether you have a short-term illness, long-term illness, are in a coma or persistent vegetative state, or have been declared brain dead?

5. **Cardiopulmonary Resuscitation (CPR).**

Do you wish to be given CPR? Do you authorize your Agent to sign and have exercised a DNR? Does this depend on whether you have a short-term illness, long-term illness, are in a coma or persistent vegetative state, or have been declared brain dead?

6. **Mechanical Ventilation.**

Do you wish to be given any form(s) of mechanical ventilation? Does this depend on whether you have a short-term illness, long-term illness, are in a coma or persistent vegetative state, or have been declared brain dead?

7. **Kidney Dialysis.**

Do you wish to be given kidney dialysis? Does this depend on whether you have a short-term illness, long-term illness, are in a coma or persistent vegetative state, or have been declared brain dead?

8. **Organ Donation.**

Do you wish to be the recipient of an organ donation, if you qualify? Does this depend on whether you have a short-term illness, long-term illness, are in a coma or persistent vegetative state, or have been declared brain dead? Do you wish to donate your organs and/or your body for scientific research?

9. **Other.**

Is there anything else that you would like your Agent to know or consider?