

Form to Fill Out While You are Well

Advance Directive Form

- An **advance directive** is a legal document you complete that outlines what treatments you wish to have at the end of your life as well as how you want caregivers to treat you as you are going through the process of dying. It also appoints an agent to represent you to the medical community (doctors, hospitals, etc.), letting the providers know what you have written in your advance directive and making sure your desires are carried out. Your agent speaks for you only if you are not physically or mentally able to speak for yourself.
- Each state has its own form for an advance directive, but there are other formats available. I personally prefer “Five Wishes,” a document that outlines for others what you want your last days to look like. The Five Wishes advance directive form can be purchased at www.agingwithdignity.org for a very minimal price.
- Here are a few important notes about advance directives. Each state has created its own advance directive form, so that if you move from state to state, you’ll need to complete a new advance directive. The Five Wishes is recognized by nearly every state in the nation as a stand-alone document. See their web site for a list of the very few states that do not yet recognize Five Wishes.
- If you live in a state that does not honor the Five Wishes document, you can complete your state’s state-approved form and attach your Five Wishes to it.
- Advance directives do not need to be notarized, in most states, and two witnesses’ signatures are all that is needed. A web site that has much information about advance directives and the directives for each state in the nation is www.caringinfo.org. Please refer to this site to get detailed information about the advance directive process, along with a list of who should get copies once yours is completed!

- After completing your forms and distributing copies to your family, your agent, your physician(s), and your hospitals, you may wish to register your directive with your state's living will lockbox. You will need to do some inquiries to determine if your state offers this service.

Form to Fill Out When Your Health is Declining

POLST (Acronym for Physician's Orders for Life Sustaining Treatment)

- Note: This form has different names in different states. You can Google your state to see what it is called in your state. Once you locate your state's form, look at the form to see which type of medical professional must sign it, for example, chiropractor or nurse practitioner This form is a legal document and must be signed by a medical professional, and in most states this must be a physician or a DO.
- The POLST form is ideal for indicating whether or not you want to have resuscitation attempted on you (or not) in the event you are found to be not breathing. Here is a link to the POLST form that California uses: [POLST_2017_wCover.pdf \(capolst.org\)](#) This site also gives valuable information about what the POLST contains.
- The POLST should not be a substitute for an advance directive. Just be sure that what you check on the POLST agrees with the choices you indicated in your advance directive!
- This form is great for someone who lives in an assisted living facility or a skilled nursing facility. It is usually placed in the individual's medical record. If you live at home, it can be placed on the refrigerator. This is the place where EMS personnel will look for a document of this nature.
- Once signed by your physician, this form can also be transported with the patient to the hospital for their records and returned home with the individual.