LIVING WILL

TO: My family, physicians and all those concerned with my care

I, _____, presently residing at _____, and being an adult of sound mind, make this declaration as a directive to be followed if for any reason I become unable to make or communicate decisions regarding my medical care.

I direct my attending physician to withhold and withdraw treatment that serves only to prolong my dying, if I should be in an incurable or irreversible mental or physical condition with no reasonable expectation of recovery, including but not limited to: (a) a terminal condition, (b) a permanently unconscious condition, or (c) a minimally conscious condition in which I am permanently unable to make decisions or express my wishes.

The procedures and treatment to be withheld and withdrawn include, without limitation, surgery, antibiotics, cardiac and pulmonary resuscitation, respiratory support, and artificially administered nutrition and hydration. I direct that treatment be limited to measures to keep me comfortable and to relieve pain, including any pain that might occur by withholding or withdrawing treatment. I do want maximum pain relief, even if it may hasten my death.

I wish to live out my last days at home rather than in a hospital, if it does not jeopardize the chance of my recovery to a meaningful and conscious life and does not impose an undue burden on my family.

If, upon my death, any of my tissue or organs would be of value for transplantation, I freely give my permission to the donation of such tissue or organs for such purpose.

These directions are the exercise of my legal right to refuse treatment. Therefore, I expect my family, physicians, health care facilities and all concerned with my care to regard themselves as legally and morally bound to act in accordance with my wishes, and in so doing to be free from any liability for having followed my directions. These directions reflect my firm and settled commitment to decline medical treatment under the circumstances indicated above. I intend these directions to be carried out, unless I have rescinded them in a new writing or by clearly indicating that I have changed my mind.

IN WITNESS WHEREOF, I have executed this declaration, as my free and voluntary act and deed, this <u>____</u> day of <u>____</u>.