

Establish an **Advanced Directive** and appoint a **Medical Power of Attorney** or **Healthcare Proxy**.

An **Advanced Directive** or **Health Care Directive** allows a person to plan treatment options and select an agent to make medical decisions on their behalf. This document is used when you are no longer able to make decisions for yourself (e.g., dementia, Alzheimer's disease, unconsciousness, etc.)

A **Medical Power of Attorney** (MPOA), or **Healthcare Proxy**, allows a person to select an agent to make health care decisions on their behalf. This agent's powers go into effect only after the person is considered unable to make their own decisions (incapacitated). The agent selected must follow the principal's preferred treatment options as written in their Advanced Directive.

Talk with your family, friends, and physicians about your advance directive. Be sure your healthcare proxy, understands your wishes.

Be as specific as necessary to express your wishes for care such as:

NO VENTILATORS, NO REMDESIVIR, NO EUA THERAPEUTICS/TREATMENTS/MEDICATIONS ETC., NO VACCINES, NO BIOLOGICS, etc.

Print, sign, date and photo-copy the form. Feel free to have it notarized if you want to make it even more official, but this isn't necessary.

Provide a copy to your MPOA/health care proxy, your family, friends, health care providers, and/or faith leaders so that the form can be readily available in the event of an emergency. Make sure it is posted in your home, or kept in your car, in an area that would be easily accessed by emergency personnel, such as posted to your refrigerator, in your vehicle's center console, in your wallet, etc.

AARP offers state specific forms for AD/MPOA/Healthcare Proxy you can complete and print: <https://www.aarp.org/caregiving/financial-legal/free-printable-advance-directives/>

If you are hospitalized and don't have an AD already pre-loaded in your medical chart, or asked to sign a consent for treatment form, have that consent form printed out. **DO NOT SIGN the general electronic version**. On the printed version, you can customize its contents, crossing out and adding declarations as needed such as those noted above (NO VENTILATORS, NO REMDESIVIR,...) Then sign and date the updated form and return to the hospital.