## **Business Products**

## **McLaren Print System Order**

Order No: 55231

Order Date: 2020-07-08 User: colleen taraskavage Phone: 810-658-6503

**Ship Location: MMG Davison Community Medical Center** 

10090 E. Lippincott Blvd Davison, Michigan 48423

Forms Quantity: 3

Paragon Dept No: 50002

**Dept Name: MMG Davison CMC** 

**Company Number: 10** 

Order Total Price: 90.00

Item Number: MHCC-10239 CARD

Item Description: Health Care Agent Appointment (Medical Power of Attorney) Card

Revision Date: 2/2015

Print:
Paper:
Size:
Fold:
Finish:
Drill:

Misc Info: Finish size: 8.5 x 11 inches; 65 lb cover; These forms have 100 forms in a package. Order the number of packages you would like.

Acceptance of Health Care Agent Rolle	McLaren
Laccept the role of Health Care Agent	HEALTH CARE
for(the patient).	Health Care Agent Appointment (Medical Power of Attorney)
SignifureDeter	make this my Health Care Agent appointment (also called Medical Power of Attorney). I am of sound mind. If the time comes when I can no larger take part in decisions about my health, these instructions should be used to foliow my wishes.
t,accept the role of next Health Care Agent(the patient).	This inleasify Cane Agent appointment is effective only if I am unable to make my own medical or ments health care discisors. It will remain in effect unless I cancel this appointment or my leasth. Care Agent wants to stop being my agent. I can cancel this appointment is any time and in any manner that states my wish. If a mental health discisor must be made, there will be a 30-day delay after I state my wish to served the appointment.
Signature Date	Choose one Philosophy of Health Care
Alterdice Michigae Bealth Ears President I have created the Michigae Relative Control   Deather Present of Arterinary to Wealth Control   Other   Present control	I believe as long as there is life there is hope. I want any and all treatments offered to me to continue my life. I am willing to accept the effects of all of treatment used. This may include life with a feeding fube, delayer, or life on a breatmen mactime if I am unable to breathe on my own. I am willing to live in a constant vegetative state.
	— I am willing to undergo many leafs, surgery, and short-form breathing machine treatment in an effort to continue my life. If the time should come when there is no reasonable hope of my recovery from physical deadabity or terminal linese, I request that I be altiered to die and not be large alive by artificial means or "heroic measures." I ask that then medicine be given only to ease suffering even though this may allow my death to occur.
	I do NOT want to undergo many tests, surgery, or short-term treatment on a breathing machine in an effort to continue my life. I only want basic medical care, such as treatment for infections and minor surgeries for a condition that can be helped on to control pain. If my condition gets worse or there is no hoped to my recovery, I ask that medicine be given to ease suffering even though this may allow my death to occur.
Spec Info: Complete the cards and punch out. Put one card in your wallet or purse that	Comfort is my main concern. I have received the news that my condition cannot be cured. I now choose only to be lept comfortable.
Aftertion Existing a facility for Previous  These conduct the faithwest philosome Christians  Charles are a symptomic  Charles for an an appropriate  Charles for an an appropriate  Charles for an an appropriate  Charles for the second on your  charles fo	Other: I want the following care-types of care: