

THE LIVING WILL

Life is valuable and precious. We all deserve to be treated with the best medical care available. But medical care has its limits. Sometimes there is a point when nothing else can be done to cure a deadly illness or injury.

Confronted with dying, I would prefer to have aggressive medical treatments stopped so that I can be with my family to die with dignity, quietly, and without pain.

THE LIVING WILL

When your condition is terminal and there is no use in trying any other treatments, you can decide to stop further medical care and accept only care that will make you more comfortable. This means that there will be no more tubes or unwanted treatment. A Living Will goes into effect only when you are too sick or injured to speak for yourself and when doctors believe you will die without the use of machines or aggressive treatment. If there is a reasonable chance that you can be restored to health, your Living Will will not apply.

A Living Will is on the next page. It is binding under Tennessee law. Yet you can cancel it or change it at any time.

Additionally, there are two options in the Living Will to consider:

- Do you want food and water to be given through tubes? If not, you can say so. You will still be offered food and water by mouth if you are physically able to take them.
- Do you want to donate your organs/tissues for transplantation after you die? You can say so on the opposite page.

It's Your Decision

A Living Will gives you control of decisions about your medical care when you have a terminal condition and are unconscious or too sick to communicate. It lets people caring for you know exactly what you want, so that you, and not others, choose how you are treated. It is the best way to make sure that your wishes will be respected and maintained by doctors, by other health care providers, and by friends and family members.

It's A Gift

A Living Will is a gift to your family and friends, who otherwise would be left to guess what you want. Families may not have the emotional strength to make those decisions for you. Family members may also disagree among themselves or with your doctors. And when disagreement occurs, the lack of direction often leads to continuation of treatment you may not want. Don't let this happen to them - or to you!

Important Notice to Medical Personnel: I Have a Living Will	My primary care physician is:
_____	Name _____
Signature Please consult this document and/or my family in case of an emergency.	Address _____
_____	Phone _____
Name of person to contact	My Living Will is located at:
Address _____	_____
Phone _____	<input type="checkbox"/> I am an organ/tissue donor.

LIVING WILL

I, _____, willfully and voluntarily make known my desire that my dying shall not be artificially prolonged under the circumstances set forth below, and do hereby declare:

If at any time, I should have a terminal condition and my attending physician has determined there is no reasonable medical expectation of recovery and which, as a medical probability, will result in my death, regardless of the use or discontinuance of medical treatment implemented for the purpose of sustaining life, or the life process, I direct that medical care be withheld or withdrawn, and that I be permitted to die naturally with only the administration of medications or the performance of any medical procedure deemed necessary to provide me with comfortable care or to alleviate pain.

ARTIFICIALLY PROVIDED NOURISHMENT AND FLUIDS: By checking the appropriate line below, I specifically:

- Authorize the withholding or withdrawal of artificially provided food, water, or other nourishment or fluids.
- DO NOT** authorize the withholding or withdrawal of artificially provided food, water, or other nourishment or fluids.

ORGAN DONOR CERTIFICATION: Notwithstanding my previous declaration relative to the withholding or withdrawal of life-prolonging procedures, if, as indicated below, I have expressed my desire to donate my organs and/or tissues for transplantation, or any of them as specifically designated herein, I do direct my attending physician, if I have been determined dead according to Tennessee Code Annotated, Section 68-3-501(b), to maintain me on artificial support systems only for the period of time required to maintain the viability of and to remove such organs and/or tissues. By checking the appropriate line below, I specifically:

- Desire to donate my organs and/or tissues for transplantation.
- Desire to donate my _____.
(insert specific organs and/or tissues for transplantation.)
- DO NOT** desire to donate my organs or tissues for transplantation.

In the absence of my ability to give directions regarding my medical care, it is my intention that his declaration shall be honored by my family and physician as the final expression of my legal right to refuse medical care and accept the consequences of such refusal.

The definitions of terms used herein shall be as set forth in the Tennessee Right to Natural Death Act, Tennessee Code Annotated, Section 32-11-103. I understand the full import of this declaration, and I am emotionally and mentally competent to make this declaration.

In acknowledgement whereof, I do hereinafter affix my signature on this the _____ day of _____, 20_____.

Declarant

We, the subscribing witnesses hereto, are personally acquainted with and subscribe our names hereto at the request of the declarant, an adult, whom we believe to be of sound mind, fully aware of the action taken herein and its possible consequence.

We, the undersigned witnesses, further declare that we are not related to the declarant by blood or marriage; that we are not entitled to any portion of the estate of the declarant upon his decease under any will or codicil thereto presently existing or by operation of law then existing; that we are not the attending physician, an employee of the attending physician or a health facility in which the declarant is a patient; and that we are not persons who, at the present time, have a claim against any portion of the estate of the declarant upon his/her death.

Witness

Witness

STATE OF TENNESSEE
COUNTY OF _____

Subscribed, sworn to and acknowledged before me by _____, the declarant, and subscribed and sworn to before me by _____ and _____, witnesses, this _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____

Answers to Your Questions About Living Wills

When should I sign a Living Will?

Now! The best time to think about your Living Will and talk about it with your doctor and your family is before you have a life-threatening illness or injury. Spend some time thinking about what is important to you. Talk with your doctor, friends, and family about your wishes. Ask questions. Then, when you are sure about what you would want, sign your Living Will.

What is a terminal condition?

A terminal condition is any disease, illness, injury, or condition where there is no reasonable medical expectation of recovery. It will result in death whether life-sustaining treatments and equipment are used or not. Common examples of a terminal condition include severe heart failure or final stages of cancer.

What should I do with my Living Will?

Give copies of your Living Will to your family members, your doctors, and anyone else you feel can help make your wishes known when you can't. **MOST IMPORTANTLY, TALK ABOUT IT.** Discuss your Living Will with them so they know exactly what you want. If your doctor does not want to follow your Living Will, he/she is obligated to find you another doctor. Keep a copy of your Living Will with your important papers, but don't put it in a bank lock box. A card is included to let people know you have a Living Will and to let them know where they can find it.

How can I cancel or change my Living Will?

You may cancel or change your Living Will at any time - orally or in writing.

Are there any other documents I should consider?

You can also have a Durable Power of Attorney for Health Care. It gives a specific person the responsibility to make decisions for you when you are too sick to speak; including making sure your Living Will is followed by your family and your doctor. You need to make sure that person agrees with your desires and is strong enough to carry them out.

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