

YOLANDA T. GRADY, M.D., INC.

FAMILY PRACTICE

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LIVING DECLARATION WITH ADVANCED DIRECTIVES

Declaration made this _____ day of _____, 20_____.

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

If at any time I should suffer from a terminal condition, persistent vegetative state or incurable affliction, and if my attending physician has determined that there can be no recovery from such condition, where the application of life prolonging procedures would serve only to artificially prolong the dying process. I direct that such procedures be withheld or withdrawn, and that I be permitted to die naturally with only the administration of medication or the performance of any medical procedure deemed necessary to provide me with comfort and care to alleviate pain.

() I want to **withhold and withdraw** nutrition and hydration (food and water) when it would serve only to artificially prolong the process of dying.

() **I DO** want nutrition and hydration (food and water).

In the absence of my ability to give directions regarding the use of such life prolonging procedures, it is my intention that this declaration shall be honored by my family and physician as my final expression of my legal right to refuse medical or surgical treatment and accept the consequences for such refusal.

If I shall have been diagnosed as pregnant and the diagnosis is known to my physician, this declaration shall have no force or effect during the course of my pregnancy.

I understand the full impact of this declaration and I am emotionally and mentally competent to make this declaration.

Further, I hereby designate my _____ .
(Relationship)

_____ to make treatment decisions on my
(Name)

behalf, should I be diagnosed as suffering from a terminal condition or incurable affliction and I become comatose and incompetent of communication.

Signature of Patient

I know the Declarant and I believe him/her to be of sound mind.

Witness

Witness