

HOW TO TELL MEDICS ABOUT YOUR MEDICAL ISSUES AND PREFERENCES: Emergency medics usually notice a bracelet, so that may be best if there is something they need to know immediately. They also often look for your driver's license to find your name and age. So you can type and cut out a slip of paper like the following, and tape it to a Driver's License, so medics can find it.

There is room for a web address and QR code (square dots, which direct medic's phone to a website) in the first column, pointing to signed forms and information online. *Some* medics can read the QR code with their phones. Others do not use phones at an accident, to protect privacy. Hospitals can use the web address if it has information they need. Putting information online, free, is explained below.

Choose: Full Code or DNR , Name: _____ dob _____, Allergies: _____ Chronic conditions: _____ Long-term prescriptions: _____ _____lb, Avg BP _____/_____ Blood Type _____ Main doctor: _____ Emergency contacts: _____

Keep phone numbers up to date on this slip, since they may not stay up to date online.

If you choose DNR, a doctor needs to sign it, and a copy of the signed DNR needs to be in your wallet or purse, for immediate access. Emergency medics need to [see a doctor's signature](#), in order to honor a DNR. Pittsburgh (UPMC) offers a [card](#) to print on pink cardstock and keep with you, with room for a doctor's signature. Your doctor may offer such a card.

FILLING IN THE FORM: The first step is to name a strong representative with excellent memory and hearing, to speak for you when you cannot. S/he needs to be with you when you're very sick, or doctors will defer to whoever is with you. Even a mumbled "ok" can override advance directives, unless your representative is there to clarify your wishes. You can mark, cross out, and write your own. [Medical ethics](#) stress **informed** patients and **values**, so you can include facts and values. You and representatives need copies at home, online and in cars.

For wording of the form, check current state rules: statelaws.findlaw.com/health-care-laws/durable-power-of-attorney.html; they will be something like this.

LEGAL DISCLAIMER: These pages do not give legal advice. The pages show options, which people can use at their own risk. The author is not a lawyer, and takes no responsibility for good or bad results, or anything which follows from applying this information. Consult a lawyer specializing in medicine or elder care to interpret and apply this to your situation.

PRINTING THE FORM: You can delete the sections which do not apply to you, to avoid confusion, and to keep it short, easiest in the [MSWord version](#). You will need it on paper for signatures and paper copies to keep handy.

GETTING THE FORM ONLINE, FOR IMMEDIATE ACCESS: After the form is signed, you can have an office or copy shop scan it to a tiff, png or gif file. Jpg and bmp are OK, but they are bigger and slower. Best *not* to scan to pdf, which is hard to read on many phones.

If it prints on more than one page, you can tape them together to scan as one long page. One page is best online, since medics may not find a second page, and the QR code or web address can only go directly to one page.

The most accessible free storage I've found is at Dropbox.com. More ideas are at globe1234.org/online.htm Dropbox lets you Upload the scan. Then when your cursor is on the file name, there is a button to *Share*, then *Create a link*, then *Copy link*. This link is a url, or web address, which goes directly to the scan you uploaded. You can create a [tiny url](#), and a [free QR](#) code for the link, print the url and QR on your wallet/purse card (above), laminate it, and/or have them [engraved](#) on a tag.

You can update a scanned file, without changing name, link, or QR, by dragging and dropping the new version (same name) onto the Dropbox file name when your browser is open at Dropbox. **Login to Dropbox every year** to keep files active.

Choose one: **Full Code** or **DNR**. Chronic conditions:
_____ lb, Avg BP _____ / _____ Type _____ Date of Birth: _____
Long-term prescriptions: _____

Allergies: _____

MEDICAL DIRECTIVES

More choices at: aaa.globe1234.com

NAMES I name the following to make healthcare decisions for me, when I cannot or do not decide for myself, and to see full information about my healthcare, until further notice. Copies have the same effect as original, including online.

REPRESENTATIVE'S NAME+PHONES (PRINT): _____

If s/he is not reasonably available or able to speak for me, I name the following as my alternate or successor representative:

ALTERNATE+PHONES: _____

Date: _____

Street (home): _____

I sign: _____ Print _____

City, State: _____

Street (home or work): _____

Witness _____ Print _____ City, State: _____

Street (home or work): _____

2nd Witness _____ Print _____ City, State: _____

Notary needed in MO,
NC, SC, WV, as of 2011

ABA.globe1234.com

Check laws above.

IF I CAN DECIDE, I WILL.

IF I CANNOT DECIDE, my choices are:

☐ Representative should use his or her own judgment.

or

TEMPORARY OR PARTIAL PROBLEMS: When I first become unconscious, confused, dazed by drugs or otherwise cannot make my own decisions, and/or my representative thinks I can still have a life which I would want, then I want the choice(s) marked in the left column below:

- ☐ **Temporary loss of consciousness: ALL TREATMENTS (Doctors call this "Full Code"): I want to recover.** Provide **all treatments** which my representative thinks are worth trying, to improve or maintain my health, or reduce my decline or pain.
- ☐ **Temporary loss of consciousness: LET ME GO: DNR-Do Not Resuscitate. No Cures. YES to comfort, hospice, palliative care.**
- ☐ **Temporary loss of consciousness: Keep my organs healthy for donations,** such as tubes for oxygen, heart-lung machine, etc.
- ☐ **Temporary loss of consciousness: LIMIT PAIN:** I can put up with pain which is **low, or short-term, or controllable** by drug or non-drug treatment: **NO** to severe long-term uncontrollable pain. **YES** to defibrillator paddles (AED), setting broken bones, breathing help and any other help which involves no or limited pain. Get consultation from a "Pain Management" specialist. Their training and exams have more detail on both drug and non-drug control of pain than palliative/hospice doctors, hospitalists, or others. Along with pain management, I do want treatments to improve or maintain my health, or reduce my decline.
- ☐ **Temporary loss of consciousness: LIMITED TUBES** can be OK. The following are examples and not a full list: breathing tube during an operation, feeding tube while healing a mouth or stomach problem, oxygen to help me breathe, intravenous therapy. If I stay unconscious and need tubes for a long time, see the coma instructions below.
- ☐ **Temporary loss of consciousness: OTHER CHOICES, IF ANY:** (can type here or attach page)

COMA, nonresponsive states: If I am in a long-term coma or responding minimally or not at all:

- ☐ Take me to a **specialized center** for non-responding patients. Most patients start responding, half reach daytime independence at home, and 20% go back to work or school. globe1234.info/more/coma
- ☐ Keep me anywhere that my representative approves.

COMA: If I stay nonresponsive, **or** I respond but my mind declines so much I **never enjoy** anything:

- ☐ **ALL TREATMENTS (Doctors call this "Full Code"):** Diagnoses are uncertain; patients adjust, and recover many abilities, even after months or years. Provide **all treatments** which my representative thinks are worth trying, to improve or maintain my health, muscles, mental functions, or reduce my decline or pain.
- ☐ **After my representative gets second opinions and is convinced I can never have a life I would want: LET ME GO: DNR-Do Not Resuscitate. No Cures. YES to comfort, hospice, palliative care.**
- ☐ **Keep my organs healthy for donation**, such as oxygen tubes, heart-lung machine, etc.
- ☐ **LIMIT PAIN:** I can accept pain which is **low, or short-term, or controllable** by drug or non-drug treatment: **NO to severe long-term uncontrollable pain. YES to defibrillator paddles (AED), setting broken bones, breathing help and any other help which involves no or limited pain.** Get consultation from a "Pain Management" specialist. Their training and exams have more detail on both drug and non-drug control of pain than palliative/hospice doctors, hospitalists, or others. Along with pain management, I want treatments to improve or maintain my health, or reduce my decline.
- ☐ **LIMIT TUBES** to the following length of time (0 means never. Blank means unlimited): Oxygen____weeks, Breathing____weeks, IV____weeks, Feeding____weeks, Urine____weeks, Dialysis____weeks
- ☐ **OTHER CHOICES, IF ANY:** (can type here or attach page)

MORE CHOICES:

- ☐ **CONSULTATIONS:** Get **additional opinions** from independent experts.
- ☐ Play **TALKING BOOKS, MUSIC**, etc., in case my mind is aware.
- ☐ Get me **ASSISTIVE DEVICES** to write, talk, use social media, control light and heat, etc.
- ☐ **CLEAR MIND:** When I am competent, I may decline some pain drugs, to keep a clear mind. Honor those requests.
- ☐ **FAITH:** These decisions are consistent with my faith that a Higher Power has a purpose for me, and this level of treatment will let that purpose happen. I will die when and where that Higher Power chooses.
- ☐ **FACT-BASED:** I am deciding as an informed patient, for example:
 - People who have DNR get **less care** of many types and **die sooner**, even when not severely ill. *JAMA IntMed* 2016 pubmed.gov/26662729
 - Many people revive after CPR, to leave hospital, or to say goodbye. Few lose mental ability. CPR.Globe1234.com
 - A tenth of CPR survivors have broken ribs; more have broken cartilage. *PrehospEmergCare* 2015 pubmed.gov/25076024
 - 2018 guidelines say patients can revive from coma after months, in specialist centers (pp.2, 6). 40% of diagnoses are wrong (p.2). In one specialized center half the coma patients achieved daytime independence at home, and 22% returned to work or school. (p.5), 17% at the same level as before. *Neurol* 2018 pubmed.gov/30089618