

Power of Attorney for Healthcare



Use this document (fillable form attached below) to choose the person who will carry out your health care instructions in case you are not conscious or are unable to make those decisions.

You do not have to choose a family member. If you do, make sure to give that person a notarized copy. Also share the document with other family members and give a copy to your doctor.

This document only gives powers to your chosen person while you are living. You may take away that power or change it at any time.

Last updated on June 22, 2023.

[Power of Attorney, Advance Directives, Health Care Power of Attorney, Do Not Resuscitate \(DNR\) Orders
power of attorney](#)

Files

[Fillable DURABLE POWER OF ATTORNEY FOR HEALTH CARE DECISIONS GENERAL STATEMENT OF AUTHORITY GRANTED_1_1.pdf](#)

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- Not enough information
- Unclear information

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