empath
SUNCOAST HOSPICE
of Hillsborough

(813) 651-7300 | SuncoastHospice.org

Statement of Advance Directives

The following is provided to inform you about Florida law regarding "advance directives."

Under Florida law (see note below), every adult has the right to make certain decisions concerning his or her medical treatment. The law also allows for your rights and personal wishes to be respected even if you are too sick to make decisions yourself.

You have the right, under certain conditions, to decide whether to accept or reject medical treatment, including whether to continue medical treatment and other procedures that would prolong your life artificially.

These rights may be spelled out by you in a "living will," containing your personal directions about life-prolonging treatment in the case of serious illness that could cause death.

You may also designate another person, or surrogate, who may make decisions for you if you become mentally or physically unable to do so. This surrogate may function on your behalf for a brief time or longer, for a life-threatening or non-life threatening illness.

Any limits to the power of the surrogate in making decisions for you should be clearly expressed.

Your health care provider will furnish you written information about its policy regarding advance directives.

Note: The legal basis for these rights can be found in the Florida Statutes: Life-Prolonging Procedure Act, Chapter 765; Health Care Surrogate Act, Chapter 765; Durable Power of Attorney, Section 709.08; and Court Appointed Guardianship, Chapter 7 44; and in the Florida Supreme Court decision on the constitutional right of privacy; GUARDIANSHIP OF ESTELLE BROWNING, 1990.

_____ **OR** _____

Patient's Signature Date Patient Representative Signature Date

(If) Patient did not sign for self due to: _____

Representative has previously acted on patient's behalf as: ☐ HCS ☐ HC Proxy ☐ POA ☐ DPOA

_____

Witness Date

Patient Name:_____

Medical Record #:_____

Team:_____

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