

ADVANCE DIRECTIVE WALLET CARD

It's important that your health care provider know that you have executed an advance directive. It's also important for any treating physician to be aware that you have an advance directive. A wallet card is one way to do this. Fill out the card, then cut it out and carry it with you at all times.

To fold the card to fit in your wallet, follow these steps:

*Step 1 - Cut the **outer border** of the card below.*

*Step 2 - Fold on the **dotted line** first with words facing out.*

*Step 3 - Fold on the **solid line** so the side with "Notice to Health Care Providers" is on both sides.*

CUT ON THE OUTER BORDER

NOTICE TO HEALTH CARE PROVIDERS I HAVE AN ADVANCE DIRECTIVE (Living Will). My Name: _____ My Doctor's Name: _____ Doctor's Phone: _____	NOTICE TO HEALTH CARE PROVIDERS ADVANCE DIRECTIVE COPIES ARE HELD BY: Name: _____ Address: _____ _____ Phone Numbers: _____ _____
OTHER ADVANCE DIRECTIVE COPIES ARE HELD BY: Name: _____ Phone Numbers: _____ _____ Name: _____ Phone Numbers: _____ _____	I ALSO HAVE A HEALTH CARE AGENT. Agent's Name: _____ Phone Numbers: _____ _____ My agent also has a copy of my health care power of attorney, and can make medical decisions for me if I am unable to do so.

**FOLD
HERE
1ST**

FOLD HERE 2ND