

My Hopes and Wishes

I want my loved ones to know my following thoughts and feelings:

1. The things that make life most worth living to me are:
2. My beliefs about when life would be no longer worth living:
3. My choices about specific medical treatments, if any (this could include your wishes regarding ventilators, dialysis, antibiotics, tube feedings etc.):
4. My thoughts and feelings about how and where I would like to die (at home, in the hospital, hospice, etc.):

A FAITH-BASED, NOT-FOR-PROFIT HEALTHCARE SYSTEM

RIVERSIDE METHODIST HOSPITAL + GRANT MEDICAL CENTER + DOCTORS HOSPITAL + GRADY MEMORIAL HOSPITAL
DUBLIN METHODIST HOSPITAL + DOCTORS HOSPITAL – NELSONVILLE + HARDIN MEMORIAL HOSPITAL + MARION GENERAL HOSPITAL
WESTERVILLE MEDICAL CAMPUS + 20 HEALTH AND SURGERY CENTERS + URGENT CARE + PRIMARY AND SPECIALTY CARE
WELLNESS + HOSPICE + HOME CARE + 22,000 PHYSICIANS, ASSOCIATES AND VOLUNTEERS

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5. If I am nearing my death, I want my loved ones to know that I would appreciate the following for comfort and support (rituals, prayers, music, etc.):

6. Religious affiliation:

I am of the _____ faith, and am a member
of _____ faith community
in (city) _____.

Please attempt to notify them of my death and arrange for them to provide my funeral/memorial/burial. I would like to include in my funeral, if possible, the following (people, music, rituals, etc.):

7. Other wishes/instructions:

Name _____

Date _____

EMMS Foundation: www.metrodoctors.com, (612) 362.3704.
Revised August 2011.

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