



**PATIENT SELF-DETERMINATION QUESTIONNAIRE - YOUR RIGHT TO DECIDE**

While you cannot remove all uncertainty about your future health care needs, having an ADVANCE DIRECTIVE in place can give you the peace of mind that comes from making your wishes known in advance.

- Declaration to Decline Life-Prolonging Procedures  
 I have     I have NOT made a Living Will
  
- Health Care Surrogate  
 I have     I have NOT designated a Health Care Surrogate
  
- Durable Power of Attorney  
 I have     I have NOT appointed a Durable Power of Attorney for Health Care Decisions

If you have a living will and/or an assigned health care surrogate we will gladly make a copy of your documents and place it in your chart.

**PATIENT PRIVACY QUESTIONNAIRE**

I. Please list the family members or other persons, if any, whom we may inform about your general medical condition and your diagnosis (including treatment, payment and health care operations):

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

II. Please list the family members or significant others, if any, whom we may inform about your medical condition **ONLY IN AN EMERGENCY**:

- Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
- Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

III. Please indicate your understanding that all correspondence from our office will be sent in a sealed envelope marked "CONFIDENTIAL":     Check here to indicate that this statement was read.

IV. Can confidential messages (i.e., appointment reminders) be left on your telephone answering machine or voicemail?     Yes     No

V. Please print the phone number where you want to receive calls about your appointments \_\_\_\_\_  
 I am fully aware that a cell phone is not a secure and private line.

\_\_\_\_\_  
 PLEASE *PRINT* PATIENT NAME

\_\_\_\_\_  
 DATE OF BIRTH

\_\_\_\_\_  
 LEGAL REPRESENTATIVE

\_\_\_\_\_  
 RELATIONSHIP TO PATIENT

\_\_\_\_\_  
 SIGNATURE OF PATIENT OR LEGAL REPRESENTATIVE

\_\_\_\_\_, 20\_\_\_\_  
 TODAY'S DATE