

Blazy Clinic  
14319 Dix Toledo Road  
Southgate, MI 48195

Dear Patient:

The Patient Self-Determination Act, passed by Congress in 1990, guarantees you the right to have your medical treatment wishes respected if you become unable to make those decisions yourself. You can name someone to make medical treatment decisions for you should you ever be unable to make them for yourself. To be certain that the person you name has the legal right to make those decisions, you must fill out a form called either a durable power of attorney for health care or a Patient Advocate Designation.

You have the right to give the person named, your Patient Advocate, written or spoken instructions about what medical treatment you want and don't want to receive.

The attached material gives you more details and can answer your questions about advance directives.

*Please check the box that applies to you.*

*I already have a Durable Power of Attorney.*

*I already have a Living Will.*

*I would like to receive information on the Durable Power of Attorney and Patient Advocate.*

*I am not interested in receiving the above information at this time. I may inquire about this information in the future.*

\_\_\_\_\_  
(Members's Signature)

\_\_\_\_\_  
(Date)