

AGREEMENT TO ADVANCE DIRECTIVE POLICY

All patients have the right to participate in their own health care decisions and to make Advance Directives or to execute Powers of Attorney that authorize others to make decisions on their behalf based on the patient's expressed wishes when the patient is unable to communicate or make decisions. Falconhead Surgery Center respects and upholds those rights.

Unlike in an Acute Care Hospital setting, Falconhead Surgery Center does not routinely perform "high risk" procedures. While it's understood that no surgery is without risk, you should discuss the specifics of your procedure with your surgical team who can answer your questions as to its risks, your expected recovery and care after your surgery.

It is the policy of Falconhead Surgery Center that regardless of the contents of any Advance Directive or instructions from a health care surrogate or attorney, if an adverse event occurs during your treatment at this facility, we will initiate resuscitative or other stabilizing measures and transfer you to an Acute Care Hospital for further evaluation. At the Acute Care Hospital, further treatment or withdrawal of treatment measures already begun will be ordered in accordance with your wishes, Advance Directive or Health Care Power of Attorney. Your agreement with this policy by your signature below does not revoke or invalidate any current Health Care Directive or Health Care Power of Attorney.

If you do not agree to this policy, we are pleased to assist you to reschedule the procedure or contact your healthcare provider if you have any questions or concerns.

PLEASE CHECK THE APPROPRIATE BOX IN ANSWER TO THESE QUESTIONS: Do you currently have any Advanced Directives (including a copy at home)? Yes No If not, are you interested in having information regarding Advanced Directives? Yes П No **Patient Signature** Date Witness Signature Date FRONT OFFICE ONLY: Patient presented a completed advanced directive at time of registration: ☐ Yes, and scanned into the patient's medical record. □ No, information was offered to the patient.