I, __________________________________________________, being of sound mind, make this statement as a directive to be followed if I become permanently unable to participate in decisions regarding my medical care. These instructions reflect my firm and settled commitment to decline medical treatment under the circumstances indicated below:

■ I direct my attending physician to withhold or withdraw treatment that serves only to prolong the process of my dying, if I should be in an incurable or irreversible mental or physical condition with no reasonable expectation of recovery.

■ These instructions apply if I am a) in a terminal condition; b) permanently unconscious; or c) if I am conscious but have irreversible brain damage and will never regain the ability to make my decisions and express my wishes.

■ I direct that treatment be limited to measures to keep me comfortable and to relieve pain, including any pain that might occur by withholding or withdrawing treatment.

■ While I understand that I am not legally required to be specific about future treatments, if I am in the condition(s) described above I feel especially strongly about the following forms of treatment:
  
  I do not want cardiac resuscitation.
  I do not want mechanical respiration.
  I do not want tube feeding.
  I do not want antibiotics.
  I do want maximum pain relief.

Other directions (insert instructions):   ________________________________
___________________________________________________________
___________________________________________________________
These directions express my legal right to refuse treatment, under the law of New York. I intend my instructions to be carried out, unless I have rescinded them in a new writing or by clearly indicating that I have changed my mind.

Signed: _____________________________________ Date:_____________
Witness:______________________________________________________
Witness:______________________________________________________

Keep the signed original with your personal papers at home. Give copies of the signed original to your doctor, family, lawyer and others who might be involved in your care.
What is a Living Will?
It is a statement, signed by you and witnessed, that tells your family and your doctor your directions about life-prolonging medical procedures when your condition is hopeless and there is no chance of regaining what you consider to be a meaningful life.

Medical advances can now keep you “alive” when your mind is gone and your body has stopped functioning naturally. A Living Will gives you the opportunity to express your wishes in advance, since you may not be able to make them known when it becomes important to do so.

What are “life-prolonging procedures”?
These may include hooking you up to a machine when you cannot breathe on your own, performing operations or prescribing antibiotics that cannot realistically increase your chance of recovery, starting your heart mechanically when it has stopped beating, or feeding you by tube. You may, if you wish, specifically list on your Living Will the procedures you would or would not want administered.

What are comfort measures?
Medication, nursing care and other treatment administered for the purpose of keeping you as comfortable and free from pain as possible.

What is meant by “Other instructions/comments”?
Your Living Will should say exactly what you want is to say. This means that you are free to add any directions to it that you wish. Space is provided for this.

Can you choose someone else to speak for you if you cannot speak for yourself?
A Health Care Proxy provides for this. It allows you to name a person you trust (your “proxy/agent”) to make medical decisions for you in accordance with your wishes at a time when you cannot make them yourself.

What should you do with your Living Will?
It is important that your family knows how you feel, and your Living Will provides an opportunity to open up discussions of a subject that is too often not talked about. You should give a copy of the signed document to the people who might someday have to produce it on your behalf. If you have a family doctor, it is most important that you discuss it with him or her as well, and have a copy placed in your medical file. If you do not have a family doctor, it is doubly important that you discuss it with someone close to you. You should also keep a copy among your important personal papers, in a place known to your family, so it can be easily located. You might also carry a card in your wallet stating that you have signed a Living Will and indicating where it can be found. Do not place it in a safety deposit box, where it would not be readily available when needed. If you change doctors, make sure your new doctor has a copy.

Is a Living Will legally binding?
You have the constitutional and common-law right to refuse any treatment you do not want. Living Wills have been given weight in court decisions as evidence of a person’s intent. Even though your state may not yet have passed a Living Will law, it is the best protection available to you until it does. In fact, a doctor or hospital treating you against your wishes (or those put forward by your proxy/agent) may be liable for damages.

How can you make sure your Living Will will be viewed as an up-to-date document?
Review it occasionally, and initial and date it, to show that it continues to express your choices accurately. You may make additions, changes, or deletions, provided they are clearly initialed and dated. Make sure any changes are shown on all copies, too. (You can, of course, revoke your Living Will at any time if you have a change of mind.)

Does a Living Will affect life insurance?
No—and nearly all the Living Will laws that have been passed clearly state that new insurance applications can not be turned down or existing policies affected by the signing of a Living Will. Signing a Living Will, or terminating artificial life-prolonging treatment, or not starting treatment at all, is not considered suicide or assisted suicide.