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LIVING WILL QUESTIONNAIRE

Name: _____

Some tips on discerning the best answer to these questions for you:

- Talk it over with your family. Think about the loved ones who will make decisions for you in the future : Do you think that they would prefer to have the control to make those decisions or that it would be a relief for them to not have that control? Do you think they could make an objective decision in a time of emotional turmoil? Do you share similar values with them so that you believe they would make the same decisions you would?
- Think about what you ask to be done if you were able to float out of your body at a time of incurable disease and tug on the arm of your loved ones and give instructions.
- How have you reacted to media stories about lengthy efforts to keep alive incurable patients? That may give you some idea how you really feel about these issues.

Below is some standard language usually included in living wills. You can select the choice in bold that is the one you want by circling it, or talk with me about developing unique language that reflects your wishes.

1. Who are you selecting to be your healthcare representative, to make choices for you when you are unable to make them for yourself? Who would be your second choice, if the first is not available?

2. Do you wish to receive feeding tubes and water if you are terminal?

*For purposes of my care and treatment, I direct that the mechanical provision of nourishment or water for hydration are among such life-sustaining procedures which **may/may not be** withheld or withdrawn within 10 days of my being certified as incurable by two physicians.*

3. Do you wish to allow the introduction of morphine to control pain even if it hastens death in terminal case?

*I hereby **do not authorize/authorize** the administration of pain relieving drugs even if they may hasten the moment of my death.*

4. Do you want heroic measures to be taken to keep you alive?

*If I should suffer an incurable injury, disease, or illness, certified by two (2) physicians (one of whom may, but is not required to be, my attending physician) (a) to be such that has resulted in a permanent unconscious state; or, (b) to be such that the application of life-sustaining procedures are experimental and not a proven therapy or are likely to be ineffective and futile in prolonging life or likely to merely prolong an imminent dying process; or, (c) to be such that I am in a terminal condition; or, (d) to be such that I have suffered a serious irreversible illness or condition, and the likely risks and burdens associated with the medical intervention to be withheld or withdrawn may reasonably be judged to outweigh the likely benefits from such intervention; or, (e) to be such that the imposition of medical intervention would be inhumane; I direct that such procedures **not be withheld or withdrawn/be withheld or withdrawn**, and that I be permitted to die naturally. By way of example and not by way of limitation, such procedures to be withheld or withdrawn may include repeated cardiac resuscitation and mechanical respiration.*

5. Are there other issues you want addressed in your living will such as organ donation?

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