

Advance Care Planning Options Under Indiana Law

Necessary Documents

Financial Power of Attorney

Health Care Power of Attorney/Appointment of Health Care Representative

Optional Documents

Living Will

Life Prolonging Procedures Declaration

Funeral Planning Declaration

Parental Delegations

Hospital/Physician-Signed Forms (for terminally ill patients)

POST (Physician Orders for Scope of Treatment) Form

Out-of-Hospital DNR (Do Not Resuscitate) Form