

ADVANCE DIRECTIVES

An advance directive is a written statement you prepare that expresses how you want medical decisions made in the future should you not be able to make them yourself.

Advance Directives Forms

[Declaration for Mental Health Treatment Form](#)

[Declaration for Mental Health Treatment Form \(En Español\)](#)

[Living Will Declaration Form](#)

[Living Will Declaration Form \(En Español\)](#)

[Practitioner Orders For Life-Sustaining Treatment \(POLST\) Form](#)

[Practitioner Orders For Life-Sustaining Treatment \(POLST\) Form \(Spanish\)](#)

[Power of Attorney for Health Care](#)

[Power of Attorney for Health Care \(Spanish\)](#)

For an overview of what these specific advanced directives are, visit The Illinois Department of Public Health's [Advanced Directives page](#).