

STATE OF LOUISIANA
PARISH OF ST. TAMMANY

DECLARATION OF LIVING WILL

KNOW ALL MEN BY THESE PRESENTS, that on _____, 20__ I, being of sound mind, willfully and voluntarily make known my desire that my dying shall not be artificially prolonged under the circumstances set forth below and do hereby declare:

If at any time I should have an incurable injury, disease, or illness, or be in a continual profound comatose state with no reasonable chance of recovery, certified to be a terminal and irreversible condition by two physicians who have personally examined me, one of whom shall be my attending physician, and the physicians have determined that my death will occur whether or not life-sustaining procedures are utilized and where the application of life-sustaining procedures would serve only to prolong artificially the dying process, I direct:

_____ That all life-sustaining procedures, including nutrition and hydration, be withheld or withdrawn so that food and water will not be administered invasively.

_____ That all life-sustaining procedures, except nutrition and hydration, be withheld or withdrawn so that food and water can be administered invasively.

I further direct that I be permitted to die naturally with only the administration of medication or the performance of any medical procedure deemed necessary by doctor and family to provide me with comfort care.

In the absence of my ability to give directions regarding the use of such life-sustaining procedures, it is my intention that this declaration shall be honored by my family and physician(s) as the final expression of my legal right to refuse medical or surgical treatment and accept the consequences from such refusal.

I understand the full import of this declaration and I am emotionally and mentally competent to make this declaration.

I live in Slidell, St. Tammany Parish, Louisiana.

WITNESS DECLARATION:

Declaration made on _____, 20__. We, the undersigned, residents of St. Tammany Parish, Louisiana, each declare this date that the declarant of this Living Will has been personally known to me and I believe _____ to be of sound mind.

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AFFIDAVIT BY DECLARANT

BEFORE ME, the undersigned Notary Public, duly commissioned and qualified, within and for the State and Parish aforesaid, **PERSONALLY CAME AND APPEARED:**

and said appearer acknowledged to me, Notary, in the presence of the undersigned competent witnesses, that ___ executed the above and foregoing instrument in the presence of the foregoing witnesses and as ___ own free and voluntary act and deed, for the uses, purposes and considerations therein expressed.

IN WITNESS WHEREOF, said appearer has executed these presents together with me, Notary, and the undersigned competent witnesses, at my office in the Parish and State aforesaid, on _____.

WITNESSES:

NOTARY PUBLIC
Louisiana Bar Roll No. 17246