

IN CASE OF A MEDICAL EMERGENCY

I have an advance directive.

Name

Where to Find My Advance Directive

Monroe County
HOSPITAL & CLINICS

An Affiliate of
MERCYONE.

 **YOUR CHOICE**
ADVANCE CARE PLANNING PROJECT

Please contact:

Emergency Contact/Healthcare Agent

Phone Number

Medical Provider

Phone Number

mchalbia.com/yourchoice

This project is supported by the Health Resources & Services Administration (HRSA) of the U.S. Department of Health & Human Services (HHS) under grant number D04RH31790, Empowering Patients through Advance Care Planning, for \$598,589.00. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government. For more information, please visit HRSA.gov.