Documents required when one simply mentions "Advanced Care Planning". I am attaching a link to an excellent PDF from the NIA (National Institute on Aging). Getting Your Affairs in Order: Advance Care Planning (nih.gov)

For the most part when one mentions the need for Advance Care Planning they are referring to:

- Advanced Directive (MyCare) MyCare | Advance Directive Program at Cottage Health
- Power of Attorney Forms (Financial, Healthcare) - Many options for these: Can be done with an attorney, There are free downloadable documents and if you or your loved one are at a Skilled Nursing Facility the ombudsman can bring one. The document will need to be notarized or witnessed.
- POLST (Physicians Orders For Life Sustaining Treatment) - The hot pink document. Similar to Advanced Directive but SUCCINCT! Addresses 3 most life-threatening situations: CPR or AND (*"allow natural death"*) , Treatment Options (Full, Selective, Comfort Focused Only) and Artificial Nutrition (Tube Feeding). This form is especially important when one does NOT want CPR or is going on to hospice care. Without, should a crisis occur and first responders not know of the patient's wishes they would be required to attempt resuscitation. This form requires the physician's signature to be valid.

For all of the above forms, it is not enough to complete them. Your loved ones must not only know of your wishes but also of the whereabouts of these documents. It is a good idea to provide your Healthcare Agents/POA with a copy. Copies of these documents should also be provided to your doctor's office, the hospital and any/all care providers.