

Advance Care Directive - wallet card

1. Print this pdf
2. Fill in the card details
3. Cut out the card around the outside edges
4. Fold the card in half (it's double-sided)
5. Place the card in your wallet for easy access

PLEASE RESPECT MY ADVANCE CARE DIRECTIVE	PLEASE RESPECT MY ADVANCE CARE DIRECTIVE
My name: _____	Find copies of my advance care directive with:
My substitute decision-maker's details are:	 GP: _____
Name: _____	 Hospital: _____
Phone: _____	 My Health Record (tick if yes) ☐
 BE OPEN BE READY BE HEARD	advancecareplanning.org.au
Advance Care Planning Australia™ is funded by the Australian Government.	