



ADVANCE DIRECTIVE ACKNOWLEDGMENT

FOR ADULT PATIENTS ONLY
(18 OR OLDER)

PLACE LABEL HERE

An Advance Health Care Directive (AHCD) lets you have a say about how you want to be treated if you get very sick. Please ask a CMC front desk team member for a copy of the California AHCD packet.

PATIENT ACKNOWLEDGEMENT OF ADVANCE HEALTH CARE DIRECTIVE (AHCD) INFORMATION RECEIVED

_____ I have been informed of my right to formulate an AHCD.
(Initial)

_____ I understand that I am not required to have an AHCD in order to receive medical
(Initial) treatment at this health care facility.

Please check one: I have an executed AHCD or I do not have an executed AHCD.