Power of Attorney for Health Care

Prepared on the Wisconsin statutory form by Stannard & Hoyt, S.C. **Specimen layout: the boxes follow the state form but this is not a copy of it.**

PRINCIPAL		
NAME Margaret Ann Ostrander	DATE OF BIRTH 04/19/1955	ADDRESS 1846 Hawkstone Drive, Madison, WI 53711

HEALTH CARE AGENT		
NAME Raymond Carl Ostrander	RELATIONSHIP Husband	TELEPHONE (608) 555-0117

ALTERNATE AGENTS, IN THIS ORDER		
FIRST ALTERNATE Ellen Marie Sievert, daughter	ADDRESS AND TELEPHONE 2207 Wexcombe Court, Naperville, IL 60540 (630) 555-0158	SECOND ALTERNATE David Raymond Ostrander, son
ADDRESS AND TELEPHONE 4380 Osprey Mesa Way, Denver, CO 80238 (303) 555-0171	WHEN AN ALTERNATE ACTS If the agent before is dead, cannot be reached or declines	AGENTS MAY ACT TOGETHER No. One at a time, in the order given

ADMISSION TO A NURSING HOME OR COMMUNITY-BASED RESIDENTIAL FACILITY		
NURSING HOME, FOR RECUPERATIVE CARE Yes	NURSING HOME, FOR A LONG-TERM STAY Yes	COMMUNITY-BASED RESIDENTIAL FACILITY Yes

FEEDING TUBES AND PREGNANCY		
AGENT MAY HAVE A FEEDING TUBE WITHHELD OR WITHDRAWN Yes	DECISIONS IF I AM PREGNANT Not applicable	ORGAN AND TISSUE DONATION Any needed organ or tissue

STATEMENT OF DESIRES, SPECIAL PROVISIONS OR LIMITATIONS		
1 Keep me at home if it can be managed	2 No machines if two doctors say I will not get better	3 Comfort care always, whatever else is stopped

SIGNING		
SIGNED BY THE PRINCIPAL *Margaret A. Ostrander*	DATE May 14, 2019	PLACE Madison, Wisconsin
WITNESS 1 Marcus T. Hoyt	WITNESS 2 Priscilla Engebretson	AGENT'S ACCEPTANCE *Raymond C. Ostrander*

This power of attorney takes effect when two physicians, or one physician and one psychologist, state in writing that the principal can no longer take in and weigh information well enough to make health care decisions. It replaces any earlier power of attorney for health care. Copies have the same force as the original. Copies given to: Arbor Bluff Health (medical records), Ellen Sievert, David Ostrander.