



**Pulmonary Disease and Critical Care Associates, P.A.**  
**10724 Little Patuxent Parkway, Suite 200**  
**Columbia, Maryland 21044**



**ADVANCE DIRECTIVES STATEMENT**

This statement is provided by Pulmonary Disease and Critical Care Associates, P.A., in accordance with a federal law called the Patient Self-Determination Act of 1990. This law requires that Pulmonary Disease and Critical Care Associates, P.A., to provide each patient with written information concerning our policies for implementing a patient's rights to make health care decisions and to formulate advance directives.

Pulmonary Disease and Critical Care Associates, P.A. respects the right of each adult to participate in health care decision making to the maximum extent of his or her ability and respects the right consistent with the requirements of the laws of Maryland. To this end, Pulmonary Disease and Critical Care Associates, P.A. has instituted specific policies and procedures to ensure that a patient's wishes with respect to his or her individual health care decisions are respected.

To ensure your ability to participate in your care, Pulmonary Disease and Critical Care Associates, P.A.'s policy requires us to:

1. Comply with the applicable Maryland laws, including statutes and court decisions regarding your right to make health care decisions and to formulate advance directives.
2. Provide you with written information to inform you that you have the right under Maryland law to accept or refuse medical or surgical care or treatment and to formulate advance directives.
3. Document in your medical record whether you have executed an advance directive.
4. Make you aware that Pulmonary Disease and Critical Care Associates, P.A. shall not condition the provision of your care otherwise discriminate against you in any way based upon whether or not you have executed an advance directive.

Separate forms for both a durable power of attorney for health care decisions and a living will that are recognized as valid under Maryland law are available. If you wish to obtain copies of these forms you may contact:

Library and Information Services Division  
 Department of Legislative Reference  
 90 State Circle  
 Annapolis, Maryland 21401  
 Balto./Annapolis: 410/841-3810/3886  
 Washington: 301/858-3810-3886  
 All other areas: 1-800-492-7122, ext. 3810/3886

This form has been discussed with me and received by me. I have also received an information packet explaining "What Is An Advance Directive".

\_\_\_\_\_ At present, I do not have an Advance Directive.

\_\_\_\_\_ At present, I do have an Advance Directive, and I will forward a copy to Pulmonary Disease and Critical Care Associates, P.A. to be placed with my record.

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**Patient Signature**

**Date**

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**Responsible Party/Relationship**

**Date**