

*Now that you've...*  
**Completed Your Power of Attorney for Health Care**

Prepared by the Kenosha County Care Transitions Coalition

Thank you for creating your document. *There are a few more important steps to complete:*

- 1. Have a conversation with the people you have appointed as your health care representatives (**Health Care Agent** and **Health Care Alternate Agent**) so they understand your wishes and values. This document can be a helpful resource for health care agents, families, and medical staff in providing your medical care (should you become unable to voice your wishes) **only** if you've told them what you want and they know where to find your document.
- 2. It is a good practice to have the Health Care and Alternate Health Care Agent sign your original document under the section entitled: "Statement of Health Care Agent and Alternate Health Care Agent." Their signatures do not need to be witnessed. To make the document valid, however, **your** signature **does** need to have two witnesses such as social workers, chaplains, or friends not named in the document or who could benefit financially. **Family members cannot witness your document**
- 3. Talk with other family and friends about your Advance Directive. Be sure they understand your wishes and are prepared to support the person you appoint.
- 4. Make copies for your appointed agents and for others you want to know your wishes.
- 5. Keep the original document in a secure place **and** keep a copy that allows easy access in an emergency (back of bedroom door, on the refrigerator, in your File of Life, or in the glove compartment of your car).
- 5. Talk with the physician(s) you normally use about your wishes at your next appointment and provide a copy to him/her.
- 6. Provide a copy for the Medical Records department of the hospital system you normally use. You may fax, mail or drop off a copy at the hospital of your choice.

Note: If your physician is part of a hospital system, you can file your document through steps 5 **or** 6 as your physician and hospital share an electronic medical record. If your physician is not part of a hospital system complete steps 5 **and** 6.

**Aurora Health Care**

Medical Records Dept.

AMCK

10400 75<sup>th</sup> St., Kenosha WI 53142

**FAX:** 262-948-5735

Questions? During business hours call

1-888-863-5502

Senior Resource Nurse: 262-948-6648

**Froedtert Hospital**

9200 West Wisconsin Avenue

Milwaukee, WI 53226-3596

**FAX:** 414-259-1244

Phone: 414-805-2909

**Froedtert South**

Medical Records Dept.

6308 8<sup>th</sup> Avenue, Kenosha, 53143

**FAX:** 262-656-2535

Questions? During business hours call and ask to speak to a chaplain.

St. Catherine's: 262-577-8832

Kenosha: 262-656-2011

**Wheaton Francis Healthcare – All Saints,  
St. Mary's Hospital, part of Ascension**

3801 Spring Street

Racine, WI 53405

**FAX:** 262-687-4108

Phone: 262-687-4388

Monday – Friday: 8 am – 4:30 pm