## MICHIGAN DO-NOT-RESUSCITATE PROCEDURE ACT (EXCERPT) Act 193 of 1996

## 333.1056 Execution of order under MCL 333.1055; form.

Sec. 6.

A do-not-resuscitate order executed for an adherent of a church or religious denomination under section 5 shall include, but is not limited to, the following language, and shall be in substantially the following form:

"DO-NOT-RESUSCITATE ORDER

Use the appropriate consent section below:

## A. DECLARANT CONSENT

I request that in the event my heart and breathing should stop, no person shall attempt to resuscitate me.

This order will remain in effect until it is revoked as provided by law. Being of sound mind, I voluntarily execute this order, and I understand its full import.

(Declarant's signature)	(Date)
(Type or print declarant's full name)	
(Signature of person who signed for declarant, if applicable)	(Date)
(Type or print full name) B. PATIENT ADVOCATE CONSENT	
I authorize that in the event the declarant's heart and breathing should stop, no person shall attempt to resuscitate the declarant. I understand the full import of this order and assume responsibility for its execution. This order will remain in effect until it is revoked as provided by law.	
(Patient advocate's signature)	(Date)
(Type or print patient advocate's name)	
ATTESTATION OF WITNESSES	
The individual who has executed this order appears to be of sound mind, and under no duress, fraud, or undue influence. Upon executing this order, the declarant has (has not) received an identification bracelet.	
(Witness signature) (Date)	(Witness signature) (Date)
(Type or print witness's name)	(Type or print witness's name)
THIS FORM WAS PREPARED PURSULANT TO AND IS IN	

History: 1996, Act 193, Eff. Aug. 1, 1996 ;-- Am. 2013, Act 155, Eff. Feb. 4, 2014

COMPLIANCE WITH, THE MICHIGAN DO-NOT-RESUSCITATE

PROCEDURE ACT.".