

ADVANCE CARE PLANNING MATERIALS ORDER FORM

*Indicates form is also available for printing online at www.munsonhealthcare.org/acp.

Rev. 04/24

| Form # | Item# | Advance Care Planning Document Description | Distribution | Order Qty. |
|--------|-------|--|--------------|------------|
| 1742 | 11419 | Advance Directive (durable power of attorney for healthcare) * | 50/pk | |
| 11649 | 66151 | Advance Care Planning Workbook* | 50/pk | |
| 6945 | 27242 | Understanding Advance Directives tri-fold brochure | 25/pk | |
| 12152 | 72610 | CPR Guide: General Fact Sheet* | 50/pk | |
| 11804 | 69074 | Advance Directive – Spanish | 10/pk | |
| 19140 | 3882 | Gone From my Sight: The Dying Experience | \$2/each | |
| 4950 | 23045 | Physician Order for Scope of Treatment (MI-POST) order* | 25/pk | |

Order via the Allscripts system or complete and fax this form to NMSA Forms Inventory: 231-935-8260.

Ordering Organization: _______ Phone: _______ Email: ________ Email: ________

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Special instructions: _______

For questions about your order contact Forms Inventory at 231-935-8228