Steinberg Diagnostic
Medical Imaging Centers
"Where Imaging Revolves Around You" ℠

NOTICE OF POLICY REGARDING ADVANCE DIRECTIVES

This facility requires all patients who present with an advance directive to sign this notice prior to their scheduled scan or procedure in order to be in compliance with the Self-Determination Act (PSDA) and State law and rules regarding advance directives. Advance directives are statements that indicate the type of medical treatment wanted or not wanted in the event an individual is unable to make those determinations and who is authorized to make those decisions. The advance directives are made and witnessed prior to serious illness or injury.

There are many types of advance directives, but the two most common forms are:

***Living Wills*:**
> These generally state the type of medical care an individual wants or does not want if he/she becomes unable to make his/her own decisions.

Durable Power of Attorney for Health Care:
> This is a signed, dated, and witnessed paper naming another person as an individual's agent or proxy to make medical decisions for that individual if he/she should become unable to make his/her own decisions.

In all Steinberg Diagnostic Medical Imaging (SDMI) facilities, if a patient should suffer a cardiac or respiratory arrest or other life threatening situations, the signed consent implies consent for resuscitation and transfer to a higher level of care. Therefore, in accordance with federal and state law, SDMI is notifying you it will NOT HONOR previously signed advanced directives for any patient. If you disagree, you must address this issue with your physician.

I have read and fully understand the information presented in this release form.

_____   _____
Patient's Signature   Date

_____   _____
Witness to Patient's Signature   Date

If patient is unable to sign or is a minor, please sign below:

_____   _____
Closest Relative or Legal Guardian's Signature   Date

_____   _____
Witness to Relative/Guardian's Signature   Date