

My Last Wishes

This Document Includes

Wishes for when I am close to death

What I want my family and friends to know

Funeral planning

Funeral ceremony

Memorial

Commemoration

Donation of organs & tissue

Additional wishes

DO

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Introduction

'My Last Wishes' is a comprehensive document that enables you to remain in control of a very personal and important issue: the manner in which you are treated if you become seriously ill, experience a life limiting illness, or following sudden collapse.

Funeral wishes are also addressed in the document. This provides you with a mechanism to arrange a funeral, your own or that of a loved one, exactly as you wish. Planning ahead gives you the opportunity to discuss your wishes with family and friends so everyone has a clear understanding of your requests. It is also reassuring for family and friends to have the knowledge that they will be carrying out your wishes exactly as you have described.

Ultimately there is no escaping death, and as we can't know when we are going to die, this document can be completed at any stage of life. Planning ahead offers the opportunity to carefully consider how you would like your end of life and funeral arrangements to take shape.

To help with this you should choose people that you trust to become involved. For the purpose of this document they are known as 'representatives' and anyone you ask must be eighteen or over. They must be willing help to arrange and carry out your wishes. When choosing who will help you, you might want to consider whom you would ask to have the 'casting vote'.

The section in this document dealing with organ & tissue donation is a clear guide for you to be explicit about what you want; it also helps those dealing with your affairs. You also have the opportunity to make choices about post mortem and embalming. In very specific circumstances a coroner may have to overrule your wishes, but in completing this document your wishes will be made clear.

Once 'My Last Wishes' has been completed and signed we suggest that it is copied and stored with your will and other documents pertinent to end of life affairs. It is important for family and friends to know of its whereabouts.

'My Last Wishes' is implemented only when illness has advanced to the point that communication is no longer possible.

Wishes for when I am close to death

Please tick yes or no and add your own choices where appropriate.

I wish to be made aware that I am close to death. Yes No

I wish my family & friends to be told that I am close to death. Yes No

I wish to see the light and trees and sky through a window, if possible. Yes No

If possible I wish to die...

At home

In hospital

In a hospice

In a nursing home

If possible I wish the room to be ... Light Dark

I wish to be alone when I die. Yes No

I wish for complete calm and silence when I die. Yes No

If possible I wish to have the following people with me when I die:

I wish to have a pet with me if possible. Yes No

If possible I wish to have my hand held when death is close. Yes No

I wish people around me to reminisce with humour. Yes No

I wish to be cared for with cheerfulness and not sadness. Yes No

I wish to be kept clean shaven. Yes No

I wish to have my teeth brushed. Yes No

I wish to have my hair brushed or combed. Yes No

What I want my family and friends to know

My Last Will & Testament is held at:

I have placed specific funeral funds in my own bank account

Yes No

Or, if applicable:

Funeral Plan number

Company with whom plan is held:

Address:

Telephone Number:

If possible and practicable I wish for my pets to be looked after by:

I wish that all of my requests be respected and followed by my family and friends, even if they do not agree with them.

Yes No

I wish to thank my family & friends who have carried out my wishes and for them to know how much this has helped me

Yes No

I wish it to be known that I carry a donor card.

Yes No

I wish to be remembered as I was before my illness.

Yes No

I have left messages with my representative(s) for friends and family.

Yes No

I wish my family and friends to know that I do not fear death.

Yes No

Cremation

As I have chosen to be cremated, I would like the ceremony to be held at the following location:

Place / Address

Name of contact person

Telephone number(s)

Email

My choice of urn is:

After my cremation I would like my ashes to be:

Scattered by my family & friends.

Made into jewellery.

Incorporated into a painting.

Incorporated into fireworks.

Launched into space.

Other (please give details):