

**DOMESTIC PARTNER ADDENDUM TO THE
ADVANCE DIRECTIVE
of
CLIENT**

I hereby state that **My Friend** is my closest living friend and life partner and that he is closer to me than any living relative. **My Friend** is to be given the right to visit me under all circumstances that would be extended to any immediate family member of a patient.

It is my express desire that **My Friend** be extended the privileges and benefits of hospital and medical rules given to relatives of patients. Of the rights and benefits extended to a family member of a patient, and therefore to be extended to **My Friend**, I include that he should be allowed to discuss my prognosis and treatment candidly with my physician, request and be given copies of my medical records, and stay with me twenty-four hours per day including staying near me in any intensive care unit.

These rights and benefits so specified do not exclude other rights and benefits extended to relatives of patients

Signed: _____
Client

Date: _____